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THE ACCURACY OF CERTIFIED CAUSES OF DEATH.

ITS RELATION TO MORTALITY STATISTICS AND THE INTERNATIONAL LIST.

Revised report of a committee of the Vital Statistics Section of the American Public Health Association, composed as follows: Committee—Haven Emerson, chairman; William H. Gullfof, E. H. Lewinski-Corwin, Louis I. Dublin, Charles Norris, Warfield T. Longcope, W. R. Williams, William H. Davis, George H. Van Buren, executive secretary.

This report is a summary of the conclusions of a committee appointed by the Section on Vital Statistics of the American Public Health Association to consider the question of the accuracy of certified causes of death and their relation to mortality statistics and the International List of Causes of Death.

At the meeting of the Section on Vital Statistics, held September 10, 1915, at Rochester, N. Y., Dr. Haven Emerson, commissioner of health of New York City, read a paper, a synopsis of which follows:

RELIABILITY OF STATEMENTS OF CAUSE OF DEATH FROM THE CLINICAL AND PATHOLOGICAL VIEWPOINTS.¹

While completeness of records of death is desirable, it is of no more importance than the accuracy of the causes themselves as stated on the death certificates.

The primary necessity for reliable and adequate statement of cause of death is obvious. The high percentage of inaccuracy in certificates of death is well known to registrars, to life insurance companies, and to pathologists, who can compare clinical diagnoses with the demonstrated cause of death at the autopsy.

If the 189 titles of the International List are studied in the light of present-day knowledge of clinical and pathological experience, it will appear that there is no plausible guarantee of accuracy in at least 41 per cent of the certificates as now presented to the registrar of records of the New York City health department.

In this 41 per cent we find 2,875 deaths in 1914 attributed to causes that can be accepted as reliable only after autopsy and 27,995 which are capable of verification by exact observations, as by chemical, bacteriological, and biological tests before death, but failing such specific proof, represent no reliable statement of death without autopsy.

¹ For the full text of this paper see the American Journal of Public Health, July, 1916.

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It is proposed to separate the reliable or probably correct statements of cause of death from the remainder as another step forward in the evolution of accurate statistics of deaths.

After the discussion of Dr. Emerson's paper the chairman was authorized to appoint a committee to consider the reliability of the causes of death as specified in the International List of Causes of Death. The committee is as follows:

Haven Emerson, chairman.
William H. Guilfooy.
E. H. Lewinski-Corwin.
Louis I. Dublin.
Warfield T. Longcope.
Charles Norris.
W. R. Williams.
William H. Davis.
George H. Van Buren, executive secretary.

Meetings, at which the chairman presided, were held in New York City in November and December, 1915; also in January, February, March, April, May, and June, 1916.

The committee submitted a report to the section on vital statistics at the annual meeting of the American Public Health Association at Cincinnati in October, 1916. The section devoted parts of three of its sessions to the consideration of this report. At the final meeting of the section it became evident that there would not be sufficient time to consider all of the recommendations submitted. It was voted, therefore, to continue the committee for another year and to instruct it to submit its recommendations as published in Reprint No. 363 of the PUBLIC HEALTH REPORTS to all members of the section on vital statistics and to others well qualified to criticize and suggest, with the request that they give the committee the benefit of their opinions. This was done. Letters were received from many of those throughout the country most interested in the subject of classification of causes of death. The committee desires at this point to express its thanks for the interest manifested in the subject by those who gave to it of their time and thought. Four meetings of the committee were required to consider the suggestions which were received.

The present report, therefore, is, in reality, a revised one. It represents not simply what may now be considered as the preliminary recommendations resulting from the committee's deliberations of last year but also its conclusions in the light of criticisms and suggestions received during 1917 from those who are best qualified to make them.

The committee desires to express its thanks to the following, who have made suggestions which have been considered in connection with its report: Dr. Lewellys F. Barker, Baltimore, Md.; Dr. C. A. Carter, statistician, Indiana State Board of Health; Dr.

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Charles V. Chapin, superintendent of health, Providence, R. I.; Dr. F. S. Crum, assistant statistician, Prudential Insurance Co. of America; Dr. Arpad C. Gerster, New York Academy of Medicine; Dr. Juan Guiteras, director of health, Habana, Cuba; Dr. C. Floyd Haviland, superintendent Connecticut Hospital for the Insane, Middletown, Conn.; Dr. J. H. Landis, health officer, Cincinnati, Ohio; Dr. Howard Lilienthal, New York City; Dr. Grace L. Meigs, Children's Bureau; Dr. Adolph Meyer, psychiatrist in chief, Johns Hopkins Hospital; Mr. Aubrey Meyerheim, statistical bureau, Metropolitan Life Insurance Co.; Dr. A. J. Rosanoff, Kings Park State Hospital, Kings Park, N. Y.; Dr. H. H. Shoulders, State registrar of vital statistics, Nashville, Tenn.; Mr. Benjamin Siegel, statistical bureau, Metropolitan Life Insurance Co.; Dr. Charles G. Wagner, medical superintendent Binghamton State Hospital, Binghamton, N. Y.; Dr. William A. White, superintendent St. Elizabeth Hospital, Washington, D. C.; Dr. W. F. Willcox, college of arts and sciences, Cornell University.

The committee was appointed primarily with the idea that it would make recommendations covering the 189 titles of the International List of Causes of Death with a view to separating them into two classes:

(a) Those not to be accepted as reliable, without autopsy, or without specific supporting data upon which accurate diagnosis is possible.

(b) Those to be accepted as reliable without autopsy, other verification, or supporting data.

It was pointed out, however, that as the committee was one on the *accuracy* of certified causes of death it should also consider:

(a) The validity of terms included under each title, i. e., the probability that each term, when reported as a cause of death, represents the exact morbid condition covered by the title heading. It was agreed that this phase of the subject be considered secondary to that of determining the question of the reliability of the titles as described above. In the course of the committee's discussions, however, it frequently became necessary to discuss the question of reliability on the basis of each included term. This is particularly true of titles under which are included both diseases that are seldom fatal and those that are surely fatal or in which the prognosis is grave.

(b) The fact that a term's reliability as a statistical entity when reported as a cause of death depends, not only upon the fact that the disease which it describes was surely present, but also upon its status as descriptive of the *primary* cause of death. As an instance of this there are a number of titles which the committee might assign to the reliable class, because diagnosis of the conditions covered by them are certain; nevertheless, statistics based on these very returns would be grossly inaccurate, because there would be inaccuracy in the statement of cause of death through the omission of the *primary* cause, even though the terminal condition, and the only one reported, were one that is reliable without autopsy. It was agreed that this is a phase that has an im-

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portant bearing on what constitutes a reliable statement of cause of death and that the committee should give it consideration. It was decided, however, that it should, so far as possible, be discussed as a separate and distinct problem upon which the committee should make recommendations.

In considering the International List from the viewpoints outlined above, and in making its recommendations, the committee has been mindful of the fact that, as is plainly set forth in the "Introductory" of the manual issued by the Bureau of the Census, "The International List of Causes of Death makes no pretension of being a proper nomenclature of diseases, or of including a scientific classification of diseases. It is only a practical working list whereby statistical compilers can assign medical terms reported by physicians as causes of death to certain more or less definite titles representing individual diseases or groups of diseases of similar character." The committee realizes that such a list necessarily contains many terms that are unscientific, inaccurate, and indefinite, as well as some that are obsolete. It has borne in mind, however, that many of these expressions are now, and will continue to be, encountered in the practical experience of registration offices, and that since it is not always practicable or possible to obtain more satisfactory statements, it is necessary for registration and compiling offices to use a list like the International List of Causes of Death in order that such expressions, together with the definite and scientific terms, may be compiled uniformly and under the titles which are most likely to cover the conditions reported. When it recommends, therefore, that titles or terms in the list be "eliminated" it means that they should not be mentioned in any official publication of statistical or registration offices in such a way as to convey to physicians in general the impression that their use is sanctioned by these offices. Whenever it is necessary to include such terms they should be printed with some identifying sign to show that they are not approved as statements of cause of death, as was done in the 1902 Manual of the International Classification (list) of Causes of Death, issued by the Census Bureau.

The committee does not propose that mortality statistics along the lines it recommends be substituted for those now published annually. However, it does believe that additional information should be asked for upon the death certificate as to whether or not an autopsy was performed or as to what test confirmed the diagnosis. Moreover, it believes that as a purely supplemental study this additional information when sufficiently complete should be tabulated to show the number of deaths compiled on the basis of specific supporting data.

The committee, however, wishes to emphasize the fact that to secure accuracy of all certified causes of death is absolutely beyond the power of any statistical bureau at the present time.

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Two educational movements are needed before this can be accomplished:

(1) The physicians must be educated to ask for post-mortems when needed to determine the cause of death, and to base their diagnoses, where possible, upon specific laboratory evidence of the cause of disease.

(2) The public must be educated to permit post-mortems when requested to determine the cause of death.

Only by such means can a satisfactory percentage of accuracy in mortality statistics be obtained.

Moreover, this day of accuracy of certified causes of death should arrive much sooner for a city, with its hospitals, than for a State, and much sooner for some States than for others.

The committee, therefore, recommends that the Vital Statistics Section indorse the educational propaganda which so clearly shows the unreliability of so many death returns as now reported; that it indorse educational propaganda which shows both physicians and the public the importance of post-mortem examinations and of laboratory aids in diagnosis; that it indorse the proposed changes in the International List of Causes of Death, together with the reliable inclusions under each title, and that it advocate the publication of tables, as a purely supplemental study, showing the number of deaths compiled on the basis of specific supporting data whenever these data shall become sufficiently well reported.

The Detailed International List of Causes of Death.

I.—GENERAL DISEASES.

1. Typhoid fever.
2. Typhus fever.
3. Relapsing fever.
4. Malaria.
 - 4a. *Including:* Malarial cachexia.
5. Smallpox.
6. Measles.
7. Scarlet fever.
8. Whooping cough.
9. Diphtheria and croup.
 - 9a. *Including:* Croup.
10. Influenza.
11. Miliary fever.
12. Asiatic cholera.
13. Cholera nostras.
14. Dysentery.
15. Plague.
16. Yellow fever.
17. Leprosy.
18. Erysipelas.
19. Other epidemic diseases.
20. Purulent infection and septicemia.
21. Glanders.
22. Anthrax.

I.—GENERAL DISEASES—Continued.

23. Rabies.
24. Tetanus.
25. Mycoses.
26. Pellagra.
27. Beriberi.
28. Tuberculosis of the lungs.
29. Acute miliary tuberculosis.
30. Tuberculous meningitis.
31. Abdominal tuberculosis.
32. Pott's disease.
33. White swellings.
34. Tuberculosis of other organs.
35. Disseminated tuberculosis.
36. Rickets.
37. Syphilis.
38. Gonococcus infection.
39. Cancer and other malignant tumors of the buccal cavity.
40. Cancer and other malignant tumors of the stomach, liver.
41. Cancer and other malignant tumors of the peritoneum, intestines, rectum.
42. Cancer and other malignant tumors of the female genital organs.

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I.—GENERAL DISEASES—Continued.

43. Cancer and other malignant tumors of the breast.
44. Cancer and other malignant tumors of the skin.
45. Cancer and other malignant tumors of other organs or of organs not specified.
46. Other tumors (tumors of the female genital organs excepted.)
47. Acute articular rheumatism.
48. Chronic rheumatism and gout.
49. Scurvy.
50. Diabetes.
51. Exophthalmic goitre.
52. Addison's disease.
53. Leukemia.
54. Anemia, chlorosis.
55. Other general diseases.
56. Alcoholism (acute or chronic).
57. Chronic lead poisoning.
58. Other chronic occupation poisonings.
59. Other chronic poisonings.

II.—DISEASES OF THE NERVOUS SYSTEM AND OF THE ORGANS OF SPECIAL SENSE.

60. Encephalitis.
61. Simple meningitis.
 - 61a. *Including:* Cerebrospinal fever.
62. Locomotor ataxia.
63. Other diseases of the spinal cord.
64. Cerebral hemorrhage, apoplexy.
65. Softening of the brain.
66. Paralysis without specified cause.
67. General paralysis of the insane.
68. Other forms of mental alienation.
69. Epilepsy.
70. Convulsions (nonpuerperal).
71. Convulsions of infants.
72. Chorea.
73. Neuralgia and neuritis.
74. Other diseases of the nervous system.
75. Diseases of the eyes and their annexa.
76. Diseases of the ears.

III.—DISEASES OF THE CIRCULATORY SYSTEM.

77. Pericarditis.
78. Acute endocarditis.
79. Organic diseases of the heart.
80. Angina pectoris.
81. Diseases of the arteries, atheroma, aneurism, etc.
82. Embolism and thrombosis.
83. Diseases of the veins (varices, hemorrhoids, phlebitis, etc.).
84. Diseases of the lymphatic system (lymphangitis, etc.).
85. Hemorrhage; other diseases of the circulatory system.

IV.—DISEASES OF THE RESPIRATORY SYSTEM.

86. Diseases of the nasal fossæ.
87. Diseases of the larynx.
88. Diseases of the thyroid body.
89. Acute bronchitis.
90. Chronic bronchitis.
91. Bronchopneumonia.
92. Pneumonia.
93. Pleurisy.
94. Pulmonary congestion, pulmonary apoplexy.
95. Gangrene of the lung.
96. Asthma.
97. Pulmonary emphysema.
98. Other diseases of the respiratory system (tuberculosis excepted).

V.—DISEASES OF THE DIGESTIVE SYSTEM.

99. Diseases of the mouth and annexa.
100. Diseases of the pharynx.
101. Diseases of the esophagus.
102. Ulcer of the stomach.
103. Other diseases of the stomach (cancer excepted).
104. Diarrhea and enteritis (under 2 years).
105. Diarrhea and enteritis (2 years and over).
 - 105a. *Including:* Due to alcoholism.
106. Ankylostomiasis.
107. Intestinal parasites.
108. Appendicitis and typhlitis.
109. Hernia, intestinal obstruction.
110. Other diseases of the intestines.
111. Acute yellow atrophy of the liver.
112. Hydatid tumor of the liver.
113. Cirrhosis of the liver.
 - 113a. *Including:* Due to alcoholism.
114. Biliary calculi.
115. Other diseases of the liver.
116. Diseases of the spleen.
117. Simple peritonitis (nonpuerperal).
118. Other diseases of the digestive system (cancer and tuberculosis excepted).

VI.—NONVENEREAL DISEASES OF THE GENITOURINARY SYSTEM AND ANNEXA.

119. Acute nephritis.
120. Bright's disease.
121. Chyluria.
122. Other diseases of the kidneys and annexa.
123. Calculi of the urinary passages.
124. Diseases of the bladder.
125. Diseases of the urethra, urinary abscess, etc.
126. Diseases of the prostate.
127. Nonvenereal diseases of the male genital organs.
128. Uterine hemorrhage (nonpuerperal).
129. Uterine tumor (noncancerous).

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VI.—NONVENEREAL DISEASES OF THE GENITOURINARY SYSTEM AND ANNEXA—Contd.

- 130. Other diseases of the uterus.
- 131. Cysts and other tumors of the ovary.
- 132. Salpingitis and other diseases of the female genital organs.
- 133. Nonpuerperal diseases of the breast (cancer excepted).

VII.—THE PUERPERAL STATE:

- 134. Accidents of pregnancy.
- 135. Puerperal hemorrhage.
- 136. Other accidents of labor.
- 137. Puerperal septicemia.
- 138. Puerperal albuminuria and convulsions.
- 139. Puerperal phlegmasia alba dolens, embolus, sudden death.
- 140. Following childbirth (not otherwise defined).
- 141. Puerperal diseases of the breast.

VIII.—DISEASES OF THE SKIN AND OF THE CELLULAR TISSUE.

- 142. Gangrene.
- 143. Furuncle.
- 144. Acute abscess.
- 145. Other diseases of the skin and annexa.

IX.—DISEASES OF THE BONES AND OF THE ORGANS OF LOCOMOTION.

- 146. Disease of the bones (tuberculosis excepted).
- 147. Diseases of the joints (tuberculosis and rheumatism excepted).
- 148. Amputations.
- 149. Other diseases of the organs of locomotion.

X.—MALFORMATIONS.

- 150. Congenital malformations (stillbirths not included).

XI.—EARLY INFANCY.

- 151. Congenital debility, icterus, and sclerema.
- 152. Other causes peculiar to early infancy.
- 153. Lack of care.

XII.—OLD AGE.

- 154. Senility.

XIII.—EXTERNAL CAUSES.

- 155. Suicide by poison.
- 156. Suicide by asphyxia.
- 157. Suicide by hanging or strangulation.
- 158. Suicide by drowning.
- 159. Suicide by firearms.
- 160. Suicide by cutting or piercing instruments.
- 161. Suicide by jumping from high places.
- 162. Suicide by crushing.
- 163. Other suicides.
- 164. Poisoning by food.
- 165. Other acute poisonings.
- 166. Conflagration.
- 167. Burns (conflagration excepted).
- 168. Absorption or deleterious gases (conflagration excepted).
- 169. Accidental drowning.
- 170. Traumatism by firearms.
- 171. Traumatism by cutting or piercing instruments.
- 172. Traumatism by fall.
- 173. Traumatism in mines and quarries.
- 174. Traumatism by machines.
- 175. Traumatism by other crushing (vehicles, railways, landslides, etc.).
- 176. Injuries by animals.
- 177. Starvation.
- 178. Excessive cold.
- 179. Effects of heat.
- 180. Lightning.
- 181. Electricity (lightning excepted).
- 182. Homicide by firearms.
- 183. Homicide by cutting or piercing instruments.
- 184. Homicide by other means.
- 185. Fractures (cause not specified).
- 186. Other external violence.

XIV.—ILL-DEFINED DISEASES.

- 187. Ill-defined organic disease.
- 188. Sudden death.
- 189. Cause of death not specified or ill defined.

In the conclusions which follow relating to each title of the International List it is understood that terms marked approved are recommended for use in the United States. It is not intended to imply that there are no other terms which adequately state the various causes of death, but for the sake of uniformity and clearness it is believed that it would be well for physicians, so far as possible, to limit themselves in making out certificates of death to the use of the terms marked *approved*.

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These conclusions, or as many of them as are approved by the section, will be submitted to the International Commission charged with the revision of the International List, which will meet in 1919.

CONCLUSIONS.

1. Typhoid Fever.

1. *Typhoid fever* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Enteric fever*, *typhoid fever*, *typhus abdominalis*.

3. *Paratyphoid fever* should be transferred to title No. 19 (*Other epidemic diseases*).

2. Typhus Fever.

1. *Typhus fever* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Typhus exanthematicus*, *typhus fever*.

3. *Tabardillo* and *Mexican typhus* should be transferred to this title from title No. 19 (*Other epidemic diseases*).

4. It is recommended that the term "Brill's disease" be included in a list made up of terms that are no longer acceptable.

3. Relapsing Fever.

1. The title heading should be changed to *Relapsing (Spirillum obermeieri) fever*, and this statement is a reliable one without autopsy only when the statement of the cause of death is accompanied or supported by a record of the finding of the etiological factor; that is, the *spirillum (spirochaetal) obermeieri* before death.

2. Of the terms now included under this title heading the following only are approved. *Recurrent fever*, *relapsing (spirillum or spirochaetal) fever*.

3. It is the opinion of the committee that a new title in the International List should be created under the caption of *Malta fever* (a form of prolonged fever due to the *micrococcus melitensis*) and that under this new title should be included the terms *febris melitensis*, *Malta fever*, and *Mediterranean fever*.

4. Malaria.

1. *Malaria* is not a reliable statement of cause of death without the supporting statement that the etiological factor, the *plasmodium malariae*, was found in the blood before death or at autopsy.

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2. Of the terms now included under this title heading the following only are approved: *Estivoautumnal fever*, *blackwater fever*, *malarial hemoglobinuria*, *malignant tertian malaria*, *quartan malaria*, *tertian malaria*.

3. The following term should be added to the list of inclusions: *Paludism*.

5. Smallpox.

1. *Smallpox* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Hemorrhagic smallpox*, *malignant smallpox*, *smallpox*, *variola*.

6. Measles.

1. *Measles* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Hemorrhagic measles*, *measles*, *morbilli*.

3. The term *rubeola* should be used *only* as a synonym of *German measles*.

7. Scarlet Fever.

1. *Scarlet fever* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Nephritis following scarlet fever*, *scarlatina*, *scarlatina angiosa*, *scarlatina maligna*, *scarlatinal* (any disease or condition so qualified), *scarlet fever*.

8. Whooping Cough.

1. *Whooping cough* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Pertussis*, *whooping cough*.

9. Diphtheria and Croup.

1. It is recommended that the title be changed to *Diphtheria* and that this be regarded as a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Buccal diphtheria*, *cutaneous diphtheria*, *diphtheria of bronchi*, *diphtheria of conjunctiva*, *diphtheria of fauces*, *diphtheria of larynx*, *diphtheria of mouth*, *diphtheria of nose*,

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diphtheria of esophagus, diphtheria of palate, diphtheria of pharynx, diphtheria of skin, diphtheria of tonsil, diphtheria of trachea, diphtheria of vulva, diphtheria of wound, gangrenous diphtheria (state site of lesion), nasal diphtheria, postdiphtheritic nephritis.

The terms *diphtheritic neuritis, diphtheritic paralysis* and *post-diphtheritic neuritis* should be accepted only when the nerves or muscles involved are specified. When possible, the site of the lesion in the nervous system should be stated.

10. Influenza.

1. It is the recommendation of the committee that *influenza* be considered unreliable as a statement of cause of death unless confirmed by autopsy, with the understanding that an autopsy would either indicate influenza, or, at least, be negative; that is, would show no other cause of death.

2. Of the terms now included under this title heading the following only are approved: *Bronchial influenza, bronchitis due to grip, bronchopneumonia due to grip, grip, influenza, influenza followed by pneumonia, influenzal pneumonia, la grippe, pneumonia due to grip.*

3. The committee recommends the addition of the term *influenzal meningitis* and *influenzal encephalitis* (Wickman) to the list of inclusions.

11. Miliary Fever.

1. It is the recommendation of the committee that *miliary fever* be considered unreliable as a statement of cause of death, without autopsy; that the title be abolished, and that the terms now listed under it be transferred to the list of terms under title No. 19.

12. Asiatic Cholera.

1. *Asiatic cholera* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Asiatic cholera, cholera* (where Asiatic cholera is prevalent), *epidemic cholera* (where Asiatic cholera is prevalent).

13. Cholera Nostras.

1. The committee recommends that the title *Cholera nostras* be omitted from the International Classification on the ground that it is merely a symptom of a severe gastrointestinal irritation, from whatever cause, and that reports under this title, if encountered on death certificates, be included under titles 104 and 105, according to age of decedent. The committee, however, is of the opinion that the present inclusions are all indefinite or obsolete and they are not, therefore, approved inclusions under any title heading.

14. Dysentery.

1. *Dysentery* is not a reliable statement of cause of death unless the specific cause of infection has been identified.

2. Of the terms now included under this title heading the following only are approved: *Amebic dysentery*, *bacillary dysentery*, *balantidic dysentery*, *dysentery*, *entamebic dysentery*.

3. The committee recommends that the title be subdivided into (A) *Amebic dysentery*, (B) *Bacillary dysentery*, and (C) *Dysentery*, *unqualified or due to other protozoa*. The inclusions under (A) are *Amebic dysentery*, *entamebic dysentery*; under (B) *bacillary dysentery*; under (C) *dysentery* (unqualified), *balantidic dysentery*.

The committee recommends the transfer to this title of the term *tropical abscess of the liver* from title No. 115 (*Other diseases of the liver*).

15. Plague.

1. *Plague* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Bubonic plague*, *pest*, *plague*, *plague* (pulmonary form), *plague* (septicemic form), *pneumonic plague*.

16. Yellow Fever.

1. *Yellow fever* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Febris flava*, *yellow fever*.

17. Leprosy.

1. *Leprosy* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Anesthetic leprosy*, *leprosy*, *nodular leprosy*, *tubercular leprosy*. The location of the lesion should be stated and all specifications of such location should, of course, be regarded (in addition to those noted above) as approved inclusions.

18. Erysipelas.

1. This is a reliable statement of cause of death, without autopsy, inasmuch as autopsy is not necessary to verify the presence of *erysipelas*.

It is an unreliable statement of cause of death if there is no qualifying statement, because the site and occasion of the infection should be given, particularly in cases of accident or injury.

2. Of the terms now included under this title heading the following only are approved: *Erysipelas after vaccination*, *erysipelas neonatorum*, *surgical erysipelas*, *erysipelas of* [any site].

3. The following term should be added to those noted above: *Erysipelas after operation*.

4. The note under title No. 18, in so far as it relates to excluded terms should read:

"This title does not include *puerperal erysipelas* (137)."

18A. Acute Poliomyelitis. (Tentative title.)

1. It is the opinion of the committee that a new title should be created (this may, for the present, be designated 18A), and that the caption should be *Acute poliomyelitis*. This should be considered a reliable statement of cause of death, without autopsy. It is the judgment of the committee that the term *epidemic infantile paralysis* may be considered an approved inclusion under this title.

2. The following terms should be transferred from present title No. 63 to this title: *Acute atrophic infantile paralysis, acute infantile paralysis, acute anterior poliomyelitis, acute poliomyelitis, epidemic poliomyelitis, acute ascending poliomyelitis, acute ascending anterior poliomyelitis, acute ascending spinal paralysis, acute polioencephalomyelitis, progressive ascending anterior poliomyelitis*.

3. The committee recommends that the term *Heine-Medin disease* be added to the list of approved inclusions.

18B. Epidemic Cerebrospinal Meningitis. (Tentative title.)

1. It is the opinion of the committee that a new title should be created (this may, for the present, be designated 18B), and that the caption should be *Epidemic cerebrospinal meningitis*. This should be considered a reliable statement of cause of death, without autopsy, if the specific organism, namely, the *meningococcus*, has been recovered from the cerebrospinal fluid.

2. It is the sense of the committee that the terms *cerebrospinal fever, epidemic cerebrospinal meningitis, and meningococcic cerebrospinal meningitis* be transferred from present title No. 61, subtitle 3, to this title.

18C. Malta Fever. (Tentative title.)

1. It is the opinion of the committee that a new title in the International List should be created under the caption of *Malta fever* (a form of prolonged fever due to the *micrococcus melitensis*) and that under this new title should be included the terms *febris melitensis, Malta fever, and Mediterranean fever*. This is a reliable cause of death, without autopsy, if there is an accompanying record of the finding of the etiological factor (*micrococcus melitensis*) before death.

2. The committee recommends that the term *undulant fever* be added to the list of approved inclusions.

19. Other Epidemic Diseases.

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its reliability or unreliability without autopsy.

2. It is recommended that the caption of the title be changed to *Other endemic, epidemic, and infectious diseases*.

3. Of the terms now included under this title heading the following only are approved: *Chicken pox, dengue, dengue fever, frambesia* (if etiological factor has been found), *filariasis* (if etiological organism has been found), *German measles, mumps, milk sickness, Papataci fever, r  theln, rubella, Rocky Mountain spotted fever, tick bite fever, trembles (milk sickness), varicella, yaws* (if etiological factor has been found).

4. The committee recommends that the terms *Chagas' disease, trypanosomiasis americana, epidemic jaundice, phlebotomus fever, rat bite fever, and sandfly fever* be added to the list of inclusions.

5. The committee recommends the transfer of the following terms from other titles to this: *Paratyphoid fever* from title No. 1 (*Typhoid fever*); *miliary fever, sweating fever* from present title No. 11 (*Miliary fever*); *cowpox, vaccinia* from title No. 20 (*Purulent infection and septicemia*); *kala-azar* from title No. 54; (*Anemia, Chlorosis*); *sleeping sickness, trypanosomiasis* from present title No. 55 (*Other general diseases*); *acute infectious jaundice, Weil's disease* from title No. 111 (*Acute yellow atrophy of the liver*). *Muguet* from title No. 99 (*Diseases of the mouth and annexa*).

6. The committee recommends the transfer of the following inclusions to other titles: *Mexican typhus, tabardillo* to title No. 2 (*Typhus fever*); *acute parotitis [parotiditis]* (not mumps) to title No. 99 (*Diseases of the mouth and annexa*); *glandular fever* to title No. 189 (*Cause of death not specified or ill-defined*).

7. The term *rubeola* should be used *only* as a synonym of German measles.

8. It was further voted to recommend that whenever any disease among the approved inclusions under this title is found to be particularly prevalent, such disease should be segregated statistically by a subtitle, and deaths therefrom be separately recorded.

9. Recommended that *paratyphoid fever* be made a subtitle of this title, and deaths reported therefrom be separately tabulated.

20. Purulent Infection and Septicemia.

1. The committee recommends that this be considered reliable, without autopsy, if there is an accompanying statement of the site and nature of the original infection. The committee also recom-

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mends that where additional information justifies the assignment of a death in which *septicemia* was a factor to other titles (e. g., to No. 137, *Puerperal septicemia*, or to any of the titles covering deaths due to external violence), it should be assigned according to standard practice.

2. Of the terms now included under this title heading the following only are approved: *General sepsis*, *general septicemia*, *hospital gangrene*, *pyemia*, *pyogenic infection*, *sepsis*, *septicemia*.

3. *Cowpox* and *vaccinia* should be transferred to title No. 19 (*Other epidemic diseases*).

21. Glanders.

1. *Glanders* is not a reliable statement of cause of death, without autopsy, unless there is an accompanying record of the finding of the etiological factor; i. e., the *bacillus mallei*.

2. Of the terms now included under this title heading the following only are approved: *Equinia*, *farcy*, *glanders*.

3. The following term should be added to the list of acceptable inclusions: *Infection by bacillus mallei*.

4. The reports should include a statement as to whether the infection was acquired in the course of occupation or industry.

22. Anthrax.

1. *Anthrax* is not a reliable statement of cause of death, without autopsy, without determination of the etiological factor; i. e., the *bacillus anthracis*.

2. Of the terms now included under this title heading the following only are approved: *Anthrax*, *charbon*, *malignant pustule*, *woolsorters' disease*.

3. The following term should be added to the list of acceptable inclusions: *Infection by bacillus anthracis*.

4. The reports should include a statement as to whether the infection was acquired in the course of occupation or industry.

23. Rabies.

1. *Rabies* is not a reliable statement of cause of death unless verified by autopsy, or proof that the infecting bite was by a proved rabid animal.

2. Of the terms now included under this title heading the following only are approved: *Hydrophobia*, *bite of mad dog*, *rabies*.

3. The committee recommends that the term *lyssa* be added to the list of inclusions.

24. Tetanus.

1. The committee recommends that this be considered a reliable statement of cause of death, without autopsy, when it is accompanied by information as to date, site, nature, and means of injury.

2. Of the terms now included under this title heading the following only are approved: *Lockjaw, tetanus, tetanus neonatorum.*

25. Mycoses.

1. The committee recommends that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Actinomycosis, aspergillosis, blastomycosis, madura foot, mycetoma, mycosis, mycosis fungoides, sporotrichosis, streptomycosis.*

3. The committee recommends the transfer to this title of the terms *psilosis* and *sprue* from title No. 110 (*Other diseases of the intestines*).

4. The committee recommends that the term *trench foot* be added to the list of approved inclusions.

26. Pellagra.

1. *Pellagra* is a reliable statement of cause of death, without autopsy.

2. Of the terms now under this title heading the following only is an approved inclusion: *Pellagra.*

3. The committee voted to note in its report the frequent complications of *pellagra* as listed in the manual. They are: *Cachexia, dermatitis, diarrhea, insanity, suicide.*

27. Beriberi.

1. *Beriberi* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Beriberi, kakké.*

28. Tuberculosis of the Lungs.

1. *Tuberculosis of the lungs* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Chronic phthisis, chronic pneumonic phthisis, chronic pneumonic tuberculosis, chronic tuberculosis, chronic tuberculous pneumonia, congenital tuberculosis, fibroid phthisis, fibroid*

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tuberculosis, laryngeal tuberculosis, phthisis, phthisis pulmonalis, pneumonic phthisis, pulmonary phthisis, pulmonary tuberculosis, tuberculosis, tuberculosis of bronchi, tuberculosis of larynx, tuberculosis of lung, tuberculosis of pleura, tuberculosis of trachea, tuberculosis pulmonalis, tuberculous bronchitis, tuberculous bronchopneumonia, tuberculous empyema, tuberculous hemoptysis, tuberculous hydropneumothorax, tuberculous laryngitis, tuberculous phthisis, tuberculous pleurisy, tuberculous pneumonia, tuberculous pneumothorax.

29. Acute Miliary Tuberculosis.

1. This is not a reliable statement of cause of death, without autopsy, unless tubercles have been found in some accessible part of the body (e. g., the retina) during life.

2. Of the terms now included under this title heading the following only are approved: *Acute general miliary tuberculosis, acute miliary tuberculosis, general miliary tuberculosis.*

30. Tuberculous Meningitis.

1. The committee recommends that the name of this title be changed to *Tuberculosis of brain and cerebrospinal meninges*, and that it be considered a reliable statement of cause of death, without autopsy, for children under 10 years of age, but not for decedents of older groups, unless there is confirmatory bacteriological proof of the presence of the tubercle bacillus in the spinal fluid.

2. Of the terms now included under this title heading the following only are approved: *Tuberculosis of brain, tuberculosis of cerebellum, tuberculosis of cerebral meninges, tuberculosis of cerebrospinal meninges, tuberculosis of cerebrum, tuberculosis of meninges, tuberculosis of spinal meninges, tuberculous encephalitis, tuberculous meningitis, tuberculous inflammation of brain.*

3. The following term should be added to the list of acceptable inclusions: *Solitary tubercle of brain.*

31. Abdominal Tuberculosis.

1. It is the recommendation of the committee that this be considered unreliable, without autopsy, unless proof of an abdominal operation or recovery of tubercle bacillus from the abdominal fluid is presented.

2. Of the terms now included under this title heading the following only are approved: *Abdominal tuberculosis, intestinal tuberculosis, tabes mesenterica, tuberculosis of abdomen, tuberculosis of alimentary canal, tuberculosis of anus, tuberculosis of appendix, tuberculosis*

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of intestine, tuberculosis of mesenteric gland, tuberculosis of omentum, tuberculosis of peritoneum, tuberculosis of rectum, tuberculosis of stomach, tuberculous appendicitis, tuberculous colitis, tuberculous enteritis, tuberculous ileocolitis, tuberculous peritonitis, tuberculous ulcer of bowel, tuberculous ulcer of intestine.

3. The terms *tuberculosis of cecum* and *tuberculosis of retroperitoneal lymph nodes* should be added to the list of inclusions.

32. Pott's Disease.

1. It is the recommendation of the committee that the name of this title be changed to *Tuberculosis of the vertebral column*, and that it be regarded as a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Caries of spine, caries of vertebrae, Pott's disease, psoas abscess, psoas and lumbar abscess, spinal caries, spinal tuberculosis, tuberculosis of spinal column, tuberculosis of spine, tuberculosis of vertebrae, tuberculous abscess of vertebrae, tuberculous caries of sacrum, tuberculous lumbar abscess.*

33. White Swellings.

1. The committee recommends that the caption of this title be changed to *Tuberculosis of joints* and considers the title in the reliable class, without autopsy.

2. Of the terms now included under this title the following only are approved: *Articular tuberculosis, tuberculosis of hip, tuberculosis of joint, tuberculosis of knee, tuberculous abscess of knee, tuberculous arthritis, tuberculous coxalgia, tuberculous disease of hip, tuberculous inflammation of knee, tuberculous swelling of joint, tuberculous synovitis.*

34. Tuberculosis of Other Organs.

1. The committee recommends that this title be subdivided as follows: (A) *Tuberculosis of the skin and subcutaneous tissue*, (B) *Tuberculosis of kidneys and genitourinary system*, (C) *Tuberculosis of bones (except vertebral column)*, (D) *Tuberculosis of organs of special sense*, (E) *Tuberculosis of lymphatic system (except mesenteric glands)*, (F) *Tuberculosis of other organs.*

2. The committee recommends that statements of cause of death listed under present title No. 34, which relate to organs or parts of the body which are accessible to direct vision, be considered reliable, without autopsy, and that in other cases they be considered unreliable, without autopsy.

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3. Under subtitle (A) the approved inclusions are: *Lupus, lupus vulgaris*, etc.¹

Under subtitle (B) the approved inclusions are: *Genitourinary tuberculosis*, etc.¹

Under subtitle (C) the approved inclusions are: *Osseous tuberculosis*, etc.¹

Under subtitle (D) the approved inclusions are: *Ocular tuberculosis*, etc.¹

Under subtitle (E) the approved inclusions are: *General glandular tuberculosis, lymphatic tuberculosis*, etc.¹

Under subtitle (F) the approved inclusions are: *Cold abscess, ganglionic tuberculosis*, etc.¹

4. The committee further recommends that a note be added to the title to the effect that wherever possible the location, extent, and character of the tuberculous lesion should be specified.

35. Disseminated Tuberculosis.

1. The committee recommends that this be considered a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Chronic general miliary tuberculosis, chronic general tuberculosis, chronic miliary tuberculosis, disseminated tuberculosis, general tuberculosis, general tuberculous infection, generalized tuberculosis, multiple tuberculosis, systemic tuberculosis*.

36. Rickets.

1. The committee recommends that the caption of this title be changed to *Rickets and other softenings of the bones*. It considers the title in the reliable class, without autopsy.

2. Subdivisions are recommended as follows: (A) *Rickets*, (B) *Other softenings of the bone*. Under (A) the approved inclusions are: *Rachitis, rickets*; under (B) they are *Mollities ossium, osteomalacia*.

3. The committee recommends the transfer of *achondroplasia, hypertrophic osteoarthropathy*, and *pulmonary osteoarthropathy* to title No. 146 (*Diseases of the bones*—tuberculosis excepted).

37. Syphilis.

1. It is the conclusion of the committee that *Syphilis* is not reliable as a statement of cause of death, without autopsy, unless diagnosis was based on lesions superficially situated or visible through body

¹ Where tuberculosis of, or tuberculous abscess of any given tissue is stated as the cause of death, and the case is one that is not classifiable under either of titles 28 to 33; it should be assigned to one of the six subtitles of title No. 34, according to the anatomical location or functional system to which the tissue belongs.

orifices, or confirmed by unquestioned specific test; further, that where syphilis is given as a cause of death, a statement of the site, extent, and character of the lesion should be given.

2. Of the terms now included under this title heading the following only are approved: *Congenital lues*, *congenital syphilis*, *gumma of brain*, *hereditary lues*, *hereditary syphilis*, *inherited syphilis*, *lues infantum*, *secondary syphilis*, *syphilis* (unqualified or of any organ or part of the body), *syphilitic* (any affection), *tertiary syphilis*.

3. The term *acquired syphilis* should be added to the list of inclusions.

4. The committee recommends the transfer of the term *hepatitis of newborn* from present title No. 151, subtitle 2 (*Congenital debility*) to this title.

38. Gonococcus Infection.

1. The committee considers this an unreliable statement of cause of death, without autopsy, unless a gonococcic lesion has been demonstrated by the recovery of the gonococcus from the site of the lesion, or by specific serum reaction, and unless the lesion was an adequate cause of death.

2. Of the terms now included under this title heading the following only are approved: *Gonococcic arthritis*, *gonococcic endocarditis*, *gonococcic infection*, *gonococcic ophthalmia*, *gonococcic peritonitis*, *gonococcus infection* (of any organ), *ophthalmia neonatorum*.

3. The following terms should be added to the list of inclusions: *Gonococcic salpingitis*, *gonococcic septicemia*.

Conclusions on Prefatory Note on Cancers and Other Malignant Tumors.

1. The caption of this prefatory note should be changed to *Forms of tumors* and subdivided into (A) *Cancers and other malignant tumors* and (B) *Nonmalignant tumors*.

2. Under (A) the following terms should be retained as acceptable inclusions: *Adenocarcinoma*, *alveolar cancer*, *alveolar sarcoma*, *angiosarcoma*, *cancer*, *carcinoma*, *carcinoma myxomatodes*, *chondrosarcoma*, *colloid carcinoma*, *columnar-celled carcinoma*, *cystosarcoma*, *endothelioma*, *epithelioma*, *fibrosarcoma*, *giant-celled sarcoma*, *hemendothelioma*, *hypernephroma*, *lymphendothelioma*, *lymphosarcoma*, *malignant tumor*, *melanosarcoma*, *metastatic cancer*, *myeloid sarcoma*, *myxosarcoma*, *osteosarcoma*, *papilliferous carcinoma*, *plexiform sarcoma*, *sarcoma*, *scirrhous carcinoma*.

3. The committee recommends that the following terms be added to the above list: *Multiple myeloma*, *gliosarcoma*, *liposarcoma*, *myosarcoma*, *chorioepithelioma*.

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4. All terms now included in the list of *Cancers and other malignant tumors*, on page 63 of the Manual of the International List of Cause of Death, except those noted above, should be eliminated.

5. Under (B) *Nonmalignant tumors*, the following terms (now included under present title No. 46, on pp. 66-67 of the Manual) should be retained as acceptable inclusions: *Adenofibroma, adenoma, adenomyxoma, angioma, cavernous lymphangioma, cavernous nevus, chondroma, cystadenoma, cystic hygroma, cystic lymphangioma, cystoma, dermoid cyst, enchondroma, myoma, myxochondroma, myxofibroma, myxoma, neurofibroma, fibroid, fibroid tumor, fibrolipoma, fibroma, fibroma molluscum, ganglionic neuroma, glioma, hemangioma, hematoma (nontraumatic), leiomyoma, lipoma, lymphangioma, lymphatic nevus, lymphoma, papilloma, rhabdomyoma, sebaceous cyst, sebaceous tumor, teratoma, tumor (nonmalignant or unqualified)*.

6. The committee recommends that the following terms be added to the above list: *Adenomyoma, cholesteatoma, chordoma, melanoma, neuroma, osteoma, odontoma, xanthoma*.

39. Cancer and Other Malignant Tumors of the Buccal Cavity.

1. The committee considers this title to be in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of buccal cavity, cheek, gum, jaw, lip, maxilla, mouth, palate, salivary gland, soft palate, tongue, tonsil*.

40. Cancer and Other Malignant Tumors of the Stomach, Liver.

1. It is the opinion of the committee that reports of cause of death listed under this title are unreliable, without autopsy, unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of bile duct, cardiac orifice of stomach, gall bladder, gall duct, liver, esophagus, pharynx, pylorus, stomach, and carcinoma ventriculi*.

41. Cancer and Other Malignant Tumors of the Peritoneum, Intestines, Rectum.

1. It is the opinion of the committee that reports of cause of death listed under this title are unreliable, without autopsy, unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

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2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of anus, appendix, cecum, colon, duodenum, ileum, intestine, jejunum, mesentery, omentum, peritoneum, rectum, retroperitoneal gland, sigmoid flexure, and lymphosarcoma of peritoneum.*

3. The following terms, in the opinion of the committee, should be added to the above list of inclusions: *Cancer of mesenteric gland, cancer of retroperitoneal space.*

42. Cancer and Other Malignant Tumors of the Female Genital Organs.

1. It is the opinion of the committee that reports of cause of death listed under this title are unreliable, without autopsy, unless an operation was performed or the neoplasm was otherwise visible or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of broad ligament, cervix, fallopian tube, ovary, uterine ligament, uterus, vagina, vulva, chorioepithelioma, deciduoma malignum, and syncytioma.*

3. The committee recommends the transfer of the following terms now included under this title: *Hydatid mole* and *hydatidiform mole* to title No. 134 (*Accidents of pregnancy*).

43. Cancer and Other Malignant Tumors of the Breast.

1. It is the opinion of the committee that this title should be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of the breast, mammary gland, nipple; cancer en cuirasse.*

3. The committee recommends the transfer to this title of the term *Paget's disease of nipple* from present title No. 133 (*Nonpuerperal diseases of the breast*).

44. Cancer and Other Malignant Tumors of the Skin.

1. The committee recommends that the terms assignable to this title be regarded as reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Cancer and other malignant tumors of auricle (of ear), chin, ear, face, head, nose, scalp, skin, umbilicus; epithelial tumor (location not indicated), epithelioma (location not indicated), rodent ulcer.*

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45. Cancer and Other Malignant Tumors of Other Organs or of Organs Not Specified.

1. It is the opinion of the committee that reports of cause of death listed under this title are not reliable, without autopsy, unless an operation was performed or the neoplasm was otherwise visible, or accessible for direct observation.

2. Of the terms now included under this title heading the following only are approved: *General carcinomatosis, general sarcomatosis, miliary carcinosis, multiple cancer* (accept, but query for type,) *sarcomatosis* (unqualified); also *cancers of organs or parts of the body not included in titles 39 to 44*, if the seat of the cancer is definitely described in the statement of cause of death.

46. Other Tumors (Tumors of the Female Genital Organs Excepted).

1. The committee recommends that the name of this title be changed to *Benign tumors* (site ill-defined or not stated), that it be considered in the unreliable class, without autopsy, unless an operation was performed, and that to the footnote in the manual beginning with "This title does not include" be added *tumors of the female genital organs*.

2. Of the terms now included under this title heading the following only are approved: *Tumor, with location not stated; tumor of abdomen, axilla, blood vessel, chest, connective tissue, gland, hip, mediastinal gland, mediastinum, muscle, neck, thorax*.

3. The inclusions under "Forms of tumor," pages 66 to 67 of the Manual of the International List of Causes of Death, so far as approved, are referred to the new prefatory note on nonmalignant tumors recommended in this report.

47. Acute Articular Rheumatism.

1. The committee recommends that the name of this title be changed to *Acute rheumatic fever* and that it be considered a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Acute articular rheumatism, acute rheumatic arthritis, acute rheumatic fever, rheumatic arthritis, rheumatic carditis,¹ rheumatic endocarditis,¹ rheumatic fever, rheumatic myocarditis,¹ rheumatic pancarditis,¹ rheumatic pericarditis, rheumatic pleurisy*.

3. The committee recommends the transfer of *Schönlein's disease* to title No. 55 (*Other general diseases*).

¹ The cardiac lesions due to acute rheumatic inflammation and not the chronic sequellæ are referred to by these inclusions.

48. Chronic Rheumatism and Gout.

1. It is the recommendation of the committee that this title be changed to *Chronic arthritis and gout* and be subdivided into (A) *Chronic arthritis* and (B) *Gout*. Each is unreliable, without autopsy.

2. The following terms are approved inclusions for A: *Arthritis deformans, chronic articular rheumatism, chronic inflammatory rheumatism, chronic rheumatic arthritis, chronic rheumatism, chronic rheumatoid arthritis, Heberden's disease, osteoarthritis, rheumatoid arthritis, spondylitis deformans*.

3. The committee recommends that the terms *chronic infectious arthritis* and *chronic hypertrophic osteoarthritis* be added to the list of inclusions under subtitle A.

4. The following terms are approved inclusions for subtitle B: *Gout, gout of joint, gouty iritis, gouty synovitis, podagra*.

49. Scurvy.

1. The committee considers this title in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Barlow's disease, infantile scurvy, scorbutus, scurvy*.

3. The committee recommends that *Werlhof's disease* be transferred to title No. 55 (*Other general diseases*).

50. Diabetes.

1. The committee recommends that this title be considered a cause of death that is reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Acidosis (diabetic), diabetes, diabetes mellitus, diabetic coma, diabetic gangrene*.

51. Exophthalmic Goiter.

1. The committee recommends that this title be discontinued (see new tentative title to follow).

51A. Diseases of the Thyroid Gland. (Tentative title.)

1. The committee recommends that this title be transferred to Class I (*General diseases*) from its present place under Class IV, and that it be considered reliable, with autopsy.

2. Of the terms now included under this title the following only are approved: *Adenoma of thyroid gland, atrophy of thyroid gland,*

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Basedow's disease, colloid goiter, cystic goiter, cretinism, cretinoid degeneration, endemic cretinism, endemic deaf-mutism, enlargement of thyroid, exophthalmic goiter, hypothyroidism, myxedema, pachydermic cachexia, Parry's disease, sporadic cretinism.

3. The committee recommends that deaths reported from *exophthalmic goiter* and synonymous terms be separately recorded, constituting a subtitle under this heading.

51B. Diseases of the Thymus Gland. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statements of cause of death under this title should be considered unreliable, without autopsy.

2. It further recommends that the following terms be transferred from present title No. 84 (*Diseases of the lymphatic system*): *Atrophy of thymus, lymphatism, status lymphaticus, status thymicolymphaticus, thymic asthma, status thymicus, enlargement of thymus gland, persistent thymus gland.*

51C. Diseases of the Parathyroid. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statement of cause of death under this title should be considered reliable, without autopsy.

2. It further recommends that under this title be included the term *tetany*, now under title No. 74 (*Other diseases of the nervous system*). Specify if following operative procedure.

52. Addison's Disease.

1. The committee considers this title in the class that is reliable, without autopsy. It recommends that the title heading be *Disease of the adrenal glands*.

2. Of the terms now included under this title heading the following only is approved: *Addison's disease*.

52A. Diseases of Pituitary Body. (Tentative title.)

1. The committee recommends that a new title be created with the above caption; that it be given a place among the titles under the class of *General diseases*. The statements of cause of death under this title should be considered unreliable, without autopsy.

2. It further recommends that the following inclusions be approved: *Aeromegaly, dyspituitarism, gigantism, hyperpituitarism, hypopituitarism, tumor of pituitary body.*

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52B. Diseases of the Spleen.

1. This title is placed here tentatively pending action on the committee's recommendation that it be transferred to this class from Class V (*Diseases of the digestive system*). See recommendation under present title No. 116. This statement of cause of death is considered unreliable, without autopsy or operation.

2. Of the terms now included under this title heading the following only are approved: *Enlargement of spleen* (nonmalarial), *megalosplenía* (nonmalarial), *tumor of spleen* (nonmalignant).

3. The committee recommends the addition of the term *spleno-megaly* (nonmalarial).

4. The committee recommends the transfer of *Banti's disease* and *splenic anemia* to this title from title No. 54 (*Anemia, chlorosis*).

5. The committee recommends the transfer of the term *hydatid cyst of spleen* to title 107, the new tentative title of which is *Diseases due to parasitic worms*.

53. Leukemia.

1. It is the opinion of the committee that the statement of *Leukemia* as a cause of death should not be considered reliable, unless verified by confirmatory blood examination.

2. Of the terms now under this title heading the following only is an approved inclusion: *Leukemia*.

3. The committee recommends that the following terms be added to the list of inclusions: *Acute lymphocytic leukemia*, *acute lymphoid leukemia*, *chronic lymphocytic leukemia*, *chronic lymphoid leukemia*, *acute myelocytic leukemia*, *acute myeloid leukemia*, *chronic myelocytic leukemia*, *chronic myeloid leukemia*, *lymphochloroma*, *myelochloroma*.

4. The committee recommends that *Hodgkin's disease* with its synonyms be accorded a separate title in the International List (see next title).

53A. Hodgkin's Disease. (Tentative title.)

1. The title is accorded this position tentatively (see recommendation under title No. 53). This title is unreliable, without autopsy, unless accompanied by a record of microscopic proof of the character of the lesion, as shown by specimens removed from the tumor or tumors during life.

2. The committee recommends that the following terms be listed as inclusions under this title heading: *Lymphadenia*, *lymphadenoma*, *lymphadenoma of lymphatic glands*, *lymphadenoma of spleen*, *lymphadenosis*, *malignant lymphadenoma*, *multiple lymphadenoma*.

54. Anemia, Chlorosis.

1. It is the opinion of the committee that statements of death from *anemia* or *chlorosis* should not be considered reliable, without autopsy, unless supported by confirmatory blood examination.

2. Of the terms now included under this title heading the following only are approved: *Anemia*, *chlorosis*; *pernicious anemia*, *progressive anemia*.

3. In the opinion of the committee the terms *hemolytic anemia*, *posthemorrhagic anemia*, *aplastic anemia*, and *progressive pernicious anemia* should be added to the list of inclusions.

4. It is the opinion of the committee that the following terms now included under this title should be transferred: *Banti's disease* and *splenic anemia* to the tentative new title No. 52B (*Diseases of the spleen*), *kala-agar* to title No. 19, the proposed caption of which is *Other epidemic, endemic, and infectious diseases*.

55. Other General Diseases.

1. The title includes so many and such unrelated conditions that no recommendation is made as to its reliability or unreliability, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Acidosis* (nondiabetic), *adiposis dolorosa*, *chronic polycythemia*, *diabetes insipidus*, *hemochromatosis*, *hemophilia*, *hemophilia neonatorum*, *Henoch's purpura*, *ochronosis*, *polycythemia*, *purpura*, *purpura rheumatica*, *sulphemoglobinemia*.

3. The committee recommends the following transfers of included terms: *Acromegaly* to new tentative title No. 52A *Diseases of the pituitary body*; *methemoglobinemia* to title No. 168 (*Absorption of deleterious gases—Conflagration excepted*); *sleeping sickness* and *trypanosomiasis* to title No. 19 (*Other epidemic diseases*).

4. The committee has recommended the transfer to this title of *Schönlein's disease* from title No. 47 (*Acute articular rheumatism*), of *Werlhof's disease* from title No. 49 (*Scurvy*), of *amyloid degeneration of liver*, *amyloid liver*, *lardaceous degeneration of liver*, *lardaceous liver*, *large waxy liver*, *waxy degeneration of liver*, *waxy liver* from title No. 113 (*Cirrhosis of the liver*), *amyloid degeneration of kidney*, *lardaceous degeneration of kidney*, *waxy degeneration of kidney* from title No. 120 (*Bright's disease*), *hemophilia neonatorum* from title No. 152 (*Other diseases of early infancy*).

56. Alcoholism (Acute or Chronic).

1. The committee recommends that this title be considered reliable, without autopsy.

2. The committee approved the following inclusions: *Alcohol poisoning, alcoholic delirium, delirium tremens, dipsomania, ethylism, mania a potu, temulentia.*

3. The committee suggests the addition to the list of inclusions of the terms *acute alcoholism, alcoholic psychosis, acute ethylism, and chronic alcoholism.*

4. It is the recommendation of the committee that the terms *alcoholic neuritis* and *alcoholic polyneuritis* be transferred to this title from present title No. 73 (*Neuralgia and neuritis*), and that *alcoholic edema of brain* and *alcoholic wet brain* be transferred from title No. 64 (*Cerebral hemorrhage, apoplexy*).

57. Chronic Lead Poisoning.

1. The committee recommends that chronic lead poisoning be regarded as reliable, without autopsy, if there appears a statement of an occupation in which decedent would be subject to lead poisoning, or if the source of the poisoning is specified and complications accompanying, sufficient to cause death, are described.

2. Of the terms now included under this title heading the following only are approved: *Chronic lead poisoning, colica pictonum, lead cachexia, lead colic, lead encephalitis, lead encephalopathy, lead paralysis, lead poisoning (not acute), morbus pictorum, painters' colic, plumbism, saturnism.*

3. The committee recommends the addition of the following terms to the list of inclusions: *Lead gout, lead nephritis.*

58. Other Chronic Occupation Poisonings.

1. The committee considers this title reliable, without autopsy, only in cases where the occupation or source of poison is specified and it is indicated that the poison was absorbed as a result of occupation; or the characteristic lesions are superficially located or accessible to direct inspection; or there is chemical or microscopic proof of the presence of poison within the body.

2. The committee did not formally approve as inclusions any of the terms which now appear under title 58; the great majority of those now listed in the Manual of the International List of Causes of Death are approved.

59. Other Chronic Poisonings.

1. The committee considers this title reliable, without autopsy, only when the source of the poison is specified, or when there is chemical or microscopic proof of the presence of the poison within the body.

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2. The committee did not formally approve as inclusions any of the terms which now appear under title No. 59; the great majority of those now listed in the Manual of the International List of Causes of Death are approved.

60. Encephalitis.

1. The committee recommends that the caption of this title be changed to *Abscess of brain*. It is not reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of brain*, *abscess of cerebellum*, *abscess of pons Varolii*, *encephalitis*, *inflammation of brain*, *intracranial abscess*, *suppurative encephalitis*.

3. The transfer of the terms *traumatic encephalitis* and *traumatic inflammation of brain* to title No. 186 (*Other external violence*) is recommended.

61. Simple Meningitis.

1. It is recommended that the name of this title be changed to *Acute infectious meningitis* and as such be considered reliable, without autopsy, only when the infecting organism is declared, or with autopsy, and that where the death is the result of a trauma or a lesion elsewhere that it be referred to its appropriate heading according to standard practice.

2. It is recommended that the present subtitle 3 (*Cerebrospinal fever*) be transferred to Class I, under the title *Epidemic cerebrospinal meningitis*. (See tentative title 18B.)

3. Of the terms now included under present subtitle 1 (*Simple meningitis*) the following only are approved inclusions: *Cerebral meningitis*, *cerebral pachymeningitis*, *cervical pachymeningitis*, *chronic cerebrospinal meningitis*, *infectious meningitis*,¹ *internal pachymeningitis*, *pachymeningitis*, *pneumococcic meningitis*, *purulent meningitis*, *suppurative meningitis*.

4. The committee recommends the addition of the following terms to subtitle 1: *Pachymeningitis externa*, *pachymeningitis interna hemorrhagica*, *pachymeningitis externa suppurativa*, *pachymeningitis interna suppurativa*, *leptomeningitis suppurativa*, *suppurative cerebrospinal meningitis*, *pneumococcic cerebrospinal meningitis*, *streptococcic cerebrospinal meningitis*.

5. Of the terms now included under present subtitle 2 (*Cerebrospinal meningitis*—undefined) the following only are approved: *Acute cerebrospinal meningitis*, *cerebrospinal meningitis*.

¹ If *infectious meningitis* is used as a synonym of *acute infectious meningitis* the infectious organism must be indicated.

6. The committee recommends the transfer to this title of the term *hemorrhagic pachymeningitis* from title No. 64 (*cerebral hemorrhage, apoplexy*).

7. The note in the Manual of the International List of Causes of Death under title No. 61 should be changed by adding *epidemic cerebrospinal meningitis* and *syphilitic meningitis*.

62. Locomotor Ataxia.

1. The committee recommends that *Locomotor ataxia* be considered reliable only when accompanied by a statement of the contributing and determining cause of death.

2. Of the terms now included under this title heading the following only are approved: *Locomotor ataxia, tabes dorsalis*.

3. The committee recommends the transfer of the term *Duchenne's disease* to title No. 63 (*Other diseases of the spinal cord*).

63. Other Diseases of the Spinal Cord.¹

1. The committee recommends that this title with all its inclusions be placed in the unreliable class, without autopsy.

2. It is recommended that a new title be created, *Acute poliomyelitis*. (See tentative title No. 18A.)

3. Of the terms now included under this title heading the following only are approved: *Acute ascending myelitis, acute myelitis, amyotrophic lateral sclerosis, amyotrophic paralysis, combined sclerosis of spinal cord, disseminated cerebrospinal sclerosis, disseminated myelitis, disseminated sclerosis, disseminated sclerosis of spinal cord, Erb's disease, Friedreich's ataxia, Friedreich's disease, Brown-Séquard's paralysis, bulbar paralysis, Charcot's disease, chronic myelitis, myelitis, myelitis from pressure, myelitis of spinal cord, new growth of membrane of spinal cord (nonmalignant), new growth of spinal cord (nonmalignant), paralysis agitans, Parkinson's disease, primary lateral sclerosis, progressive bulbar paralysis, progressive multiple paralysis, progressive muscular atrophy, progressive muscular dystrophy, hematomyelia, hematomyelitis, hematomyelitis, hemorrhage of spinal cord, hemorrhage of spinal membrane, hereditary ataxia, hereditary spastic paraplegia, labioglossolaryngeal paralysis, labioglossopharyngeal paralysis, Landry's disease, Landry's paralysis, lateral sclerosis, Morvan's disease, multiple sclerosis, syringomyelia, transverse myelitis, pseudohypertrophic paralysis, spastic paralysis of spinal cord, spastic spinal paralysis, trembling paralysis, tumor of spinal cord, tumor of spinal meninges.*

¹ Exclusive of acute poliomyelitis (epidemic infantile paralysis).

4. The committee recommends the addition of the following terms: *Hereditary spinal ataxia, Friedreich's or combined systemic disease, progressive spinal amyotrophy, Brown-Séquard's syndrome.*

5. The committee recommends the transfer to this title of *Duchenne's disease* from title No. 62 (*Locomotor ataxia*).

6. The committee recommends the transfer of the following terms now included to other titles: *Acute anterior poliomyelitis, acute atrophic spinal paralysis, acute infantile paralysis, acute ascending poliomyelitis, acute ascending anterior poliomyelitis, acute ascending spinal paralysis, acute polioencephalomyelitis, progressive ascending anterior poliomyelitis, anterior poliomyelitis* to new tentative title 18A; *myasthenia gravis* to title No. 149 (the proposed caption of which is *Diseases of the muscles, tendons, and their annexa*).

64. Cerebral Hemorrhage, Apoplexy.

1. It is recommended that the name of this title be changed to *Intracranial hemorrhage*, and that it include terms indicating the various anatomico-pathological processes that bring about the apoplectic death; if the contributing preexisting conditions or lesions are stated, statistical assignment according to standard practice is recommended; also that the title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Apoplectic stroke, apoplexy,¹ apoplexy of brain, apoplexy of meninges, bulbar apoplexy, bulbar hemorrhage, cerebral apoplexy, cerebral hemorrhage¹ (1m+), epidural hemorrhage, hematoma of dura mater, hematoma of meninges, hemorrhage of brain¹ (1m+), hemorrhage of cerebellum, hemorrhage of cerebrium, hemorrhage of medulla, hemorrhage of meninges, hemorrhage of pons, intracranial hemorrhage, paralytic shock, paralytic stroke, pontine hemorrhage, ventricular hemorrhage.*

3. The committee recommends the following transfers of included terms: *Alcoholic edema of brain, alcoholic wet brain* to title No. 56 (*Alcoholism, acute or chronic*); *hemorrhagic pachymeningitis* to title No. 61, the present caption of which is *Simple meningitis*.

65. Softening of the Brain.

1. It is recommended that this title be eliminated as a main title and that the terms now classified under it be transferred to title No. 74 (*Other diseases of the nervous system*).

2. Of the terms now included under this title heading the following only are approved: *Cerebral softening, encephalomalacia, soften-*

¹ Deaths of infants under 1 month of age are assigned to title No. 152, subtitle 1 (*Injuries at birth*).

ing of brain. These should be queried when received by registration offices or by the Bureau of the Census to determine whether they were not actually cases of general paresis of the insane, in which event they should be listed under title No. 67 (*General paralysis of the insane*); inquiry should also be made to determine if the condition was due to *arteriosclerosis, embolism, thrombosis, alcoholism, traumatism*, or to any other discernible cause.

66. Paralysis Without Specified Cause.

1. It is recommended that title No. 66 be in the unreliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Congenital hemiplegia, hemiplegia.*

3. The committee recommends that reports of *paraplegia* be queried unless specified as of spinal origin.

4. It is recommended that *hereditary hemiplegia* be added to the list of approved inclusions.

67. General Paralysis of the Insane.

1. This is in the reliable class, without autopsy, provided it is accompanied by a statement of the contributing and determining cause.

2. Of the terms now included under this title heading the following only are approved: *Bayles's disease, dementia paralytica, general paralysis* (insane or reported from asylum), *general paresis, general tabetic paralysis, generalized paralysis (insane), paralysis of insane, paretic dementia, progressive general paralysis.*

3. The committee recommends the addition of the terms *chronic diffuse meningoencephalitis*, and *taboparesis*.

68. Other Forms of Mental Alienation.

1. This is in the unreliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Circular insanity, dementia, dementia praecox, exhaustive psychosis, infective psychosis, Korsakoff's disease, Korsakoff's syndrome, manic depressive psychosis, paranoia, primary dementia, terminal dementia, toxic psychosis, traumatic psychosis.*

3. It is recommended that the term *schizophrenia* be added to the list of inclusions.

69. Epilepsy.

1. *Epilepsy* is an unreliable statement of cause of death, without autopsy, unless death occurred in an epileptic attack and was witnessed, and there was a previous history of epilepsy.

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2. Of the terms now included under this title heading the following only are approved: *Epilepsy*, *epileptic convulsions*, *epileptic dementia*, *epileptic psychosis*, *grand mal*, *status epilepticus*.

3. The committee recommends that the term *idiopathic epilepsy* be added to the list of inclusions.

70. Convulsions (Nonpuerperal).—71. Convulsions of Infants.

1. The committee recommends that these titles and included terms be transferred to title No. 189 (*Cause of death not specified or ill-defined*).

2. The following inclusions are approved for this transfer: *Convulsions*, *infantile convulsions*, *spasms*.

72. Chorea.

1. *Chorea* is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Chorea*, *chorea insaniens*, *chorea major*, *rheumatic chorea*, *Sydenham's chorea*.

3. The committee recommends that *electric chorea* be added to the list of inclusions.

73. Neuralgia and Neuritis.

1. It is recommended that the term *Neuralgia* be omitted from the title and be included under title No. 189 (*Cause of death not specified or ill-defined*) and that *Neuritis* be considered a reliable statement of cause of death, without autopsy, preferably with statement of the nerve or nerves involved and of the etiological factor.

2. Of the terms now included under this title heading the following only are approved: *General neuritis*, *multiple neuritis*, *neuritis* (of any nerve), *peripheral neuritis*, *polyneuritis*.

3. The committee recommends the transfer of *alcoholic neuritis* and *alcoholic polyneuritis* to title No. 56 (*Alcoholism, acute and chronic*). The transfer of *tic douloureux* and *trigeminal neuralgia* to title No. 74 is recommended.

4. The committee recommends the transfer to this title of the terms *paralysis of diaphragm*, *paralysis of phrenic nerve*, and *paralysis of pneumogastric nerve* from title No. 74 (*Other diseases of the nervous system*).

5. The committee recommends that the term *infectious neuritis* be added to the list of inclusions.

6. It is further recommended that registration offices and the Bureau of the Census query returns of *neuritis* and its synonyms to determine the nerve or nerves involved and the etiological factor.

74. Other Diseases of the Nervous System.

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its reliability or unreliability without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Acute hydrocephalus, acquired hydrocephalus, cerebellar tumor, cerebral cyst, cerebral diplegia of children, cerebral glioma, cerebral tumor, chronic progressive chorea (Huntington's chorea), cyst of brain, cyst of cerebellum, cyst of membrane of brain, cystic tumor of brain, diffuse cerebral sclerosis, glioma of brain, glioma of cerebellum, hereditary chorea, Huntington's chorea, Huntington's disease, infantile cerebral diplegia, infantile cerebral paralysis, infantile imbecility, infantile spastic paralysis, internal hydrocephalus, intracranial tumor, Jacksonian epilepsy, Little's disease, meningeal tumor, new growth of brain (nonmalignant), new growth of membrane of brain (nonmalignant), paramyoclonus multiplex, polioencephalitis inferior, polioencephalitis superior, psammoma, symptomatic epilepsy, traumatic epilepsy, tumor of brain, tumor of corpora quadrigemina, tumor of meninges, tumor of meninges of brain, tumor of motor tract, tumor of nerve, tumor of pons Varolii.*

3. The committee recommends the addition to the list of inclusions of the following terms: *Lobular cerebral sclerosis, von Recklinghausen's disease, polioencephalitis superior (Wernicke).*

4. The committee recommends the transfer to this title of the following: No. 65 (*Softening of the brain*), all inclusions; *tic douloureux*, and *trigeminal neuralgia* from No. 73; *myotonia congenita* and *Thomsen's disease* from present title No. 149 (*Other diseases of the organs of locomotion*).

5. The committee recommends the transfer of the following inclusions to other titles: *Cretinism* to new tentative title No. 51A (*Diseases of the thyroid gland*); *systicercus of brain and hydatid of brain* to title No. 107, the new tentative caption of which is *Diseases due to other parasitic worms*; *paralysis of diaphragm, paralysis of phrenic nerve, paralysis of pneumogastric nerve* to title No. 73 (now *Neuralgia and neuritis*, but the committee has recommended that it be changed to *Neuritis*); *tetany* to new tentative title 51C (*Diseases of the parathyroid*); *tumor of pituitary body* to new tentative title No. 52A (*Diseases of the pituitary body*); *Caisson disease, bends, divers' palsy, divers' paralysis* to a new title to be known as *Caisson disease* and which, for the present, may be designated 74A.

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74A. Caisson Disease. (Tentative title.)

1. The committee recommends that a new title be created under the above caption and that under it be included the following terms now listed under title No. 74 (*Other diseases of the nervous system*): *Bends, caisson disease, divers' palsy, divers' paralysis.*

2. The committee recommends the inclusion of this title in the reliable class, without autopsy, if the character of the work during which the disease was acquired is specified, and if the death occurs within six hours after the release from pressure.

75. Diseases of the Eyes and Their Annexa.

1. The committee recommends that this title be considered reliable, without autopsy.

2. It is the opinion of the committee that *glaucoma, abscess of cornea, cataract, and ophthalmia* are the only terms now listed under this title heading that should be approved.

76. Diseases of the Ears.

1. The conditions covered by this title are, when reported in definite terms, reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Caries of middle ear, labyrinthine suppuration, labyrinthine vertigo, otitis media, purulent otitis media, suppurative otitis media.*

3. The committee recommends that the following terms be added to the list of inclusions: *Acute suppurative mastoiditis, chronic suppurative mastoiditis, acute suppurative otitis media, chronic suppurative otitis media, otitic meningitis.*

4. The committee recommends the transfer to this title of the following terms: *Abscess of mastoid process, disease of mastoid cells, empyema of mastoid process, mastoid abscess, mastoiditis, necrosis of mastoid*—all from title No. 146 (*Diseases of the bones—tuberculosis excepted*).

5. The footnote should contain a statement to the effect that where, on inquiry, either *tuberculosis* or *syphilis* is admitted as the etiological factor the death should be compiled as due to *tuberculosis* or *syphilis*.

77. Pericarditis.

1. Pericarditis is an unreliable report of cause of death, without autopsy, unless accompanied by a statement of primary cause or of the character of exudate obtained by paracentesis.

2. Of the terms now included under this title heading the following only are approved: *Adherent pericardium, adhesive pericarditis,*

effusion of pericardium, fibrinous pericarditis, hemopericardium (inquiry should be made as to source of blood—traumatic? Aneurism?) hydropericardium, hydropneumopericardium, mediastinopericarditis, pericarditis, pericarditis with effusion, pneumopericardium, purulent pericarditis, pyopericardium, pyopneumopericardium, suppurative pericarditis.

78. Acute Endocarditis.

1. The committee recommends that the title heading be changed to *Acute infectious endocarditis and myocarditis*, and is of the opinion that it is a reliable statement, without autopsy.

2. The committee recommends that whenever the original site of the infection is specified the death be classified according to standard practice.

3. Of the terms now included under this title heading the following only are approved: *Acute endocarditis, acute interstitial myocarditis, acute myocarditis, acute ulcerative endocarditis, congenital endocarditis, malignant endocarditis, mycotic endocarditis, septic endocarditis, ulcerative endocarditis, vegetative endocarditis.*

4. The committee recommends that the following terms be added to the list of inclusions: *Acute valvular endocarditis, acute infectious endocarditis.*

79. Organic Diseases of the Heart.

1. It is the recommendation of the committee that the name of this title be changed to *Other organic diseases of the heart* and that it be subdivided into (A) *Affections of the myocardium* and (B) *Affections of the valves of the heart.*

2. The committee recommends that the title be put in the reliable class, without autopsy.

3. Of the terms now under this title heading the following only are approved inclusions under the tentative subtitles:

Tentative subtitle (A): *Amyloid degeneration of heart, aneurysm of heart, brown atrophy of heart, chronic interstitial myocarditis, chronic myocarditis, fatty degeneration of heart, fatty degeneration of myocardium, interstitial myocarditis, myocardial degeneration, myocardial insufficiency.*

Tentative subtitle (B): *Aneurysm of valve of heart, aortic incompetency, aortic insufficiency, aortic obstruction, aortic regurgitation, aortic stenosis, aortic valvular disease of heart, cardiac mitral disease, chronic endocarditis, chronic mitral endocarditis, chronic rheumatic endocarditis, chronic ulcerative endocarditis, chronic valvular endocarditis, chronic valvular heart disease, incompetency of aortic valve, incompetency of mitral valve, incompetency of tricuspid valve, in-*

sufficiency of aortic valve, insufficiency of mitral valve, insufficiency of tricuspid valve, mitral incompetency, mitral insufficiency, mitral obstruction, mitral regurgitation, mitral stenosis, mitral valvular disease of heart, pulmonary insufficiency (ly+), pulmonary regurgitation, pulmonary stenosis, pulmonary valvular disease of heart, tricuspid incompetency, tricuspid insufficiency, tricuspid regurgitation, tricuspid valvular disease of heart, valvular cardiac disease, valvular disease of heart.

4. The committee recommends that the following terms be added to the list of inclusions: *Chronic cardiac hypertrophy and dilatation* (A), *chronic degenerative myocarditis* (A), *fatty infiltration of heart* (A), *tricuspid stenosis* (B).

80. Angina Pectoris.

1. The committee recommends that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Angina of heart, angina pectoris, cardiac angina, stenocardia.*

81. Diseases of the Arteries, Atheroma, Aneurism, Etc.

1. The committee recommends that the name of this title be changed to *Diseases of the arteries* and that the title be subdivided into (A) *Aneurism* and (B) *Other diseases of the arteries*. *Aneurism* is not a reliable statement, without autopsy, unless the anatomical location of the enlargement is specified. Subdivision B should be considered a reliable statement of cause of death, without autopsy. This decision is made not because it is free from error, but because it would be impractical to exclude the title under present clinical conditions.

2. Of the terms now included under this title heading the following only are approved: *Aneurism of* (any specified site), *aortitis, arteriocapillary fibrosis, arteriofibrosis, arteriosclerosis, arteriosclerosis of brain, arteriovenous aneurism, arteritis, arteritis obliterans, atheroma, atheromatous degeneration of artery, cerebral arteriosclerosis, diffuse arteriosclerosis, endarteritis, endarteritis deformans, general arteriosclerosis, general atheroma.*

3. The committee recommends that the terms *thromboangitis obliterans, atherosclerosis, and arteriolar sclerosis* be added to the list of inclusions, and that the qualifying word *nontraumatic* be inserted after the term *rupture of artery*.

82. Embolism and Thrombosis.

1. It is the recommendation of the committee that *Embolism* and *Thrombosis* be considered reliable causes of death, without autopsy;

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and the committee also desires to emphasize the fact that it is desirable to specify the site of obstruction (name of vessel obstructed) and whether the obstruction was embolic or thrombotic, and, if embolic, the source of the embolus.

2. Of the terms now included under this title heading the following only are approved: *Adam-Stokes disease, brachycardia, bradycardial thrombosis, embolism of artery, embolism of coronary artery, embolism of mesenteric artery, embolism of pulmonary artery, obstruction of artery by clot, occlusion of artery by clot, pulmonary embolism, pulmonary thrombosis, thrombosis of artery, thrombosis of cerebral sinus, thrombosis of iliac artery, thrombosis of lateral sinus, thrombosis of portal vein, thrombosis of pulmonary artery, thrombosis of splenic vessel, thrombosis of uterine vein, thrombosis of vein.*

3. The committee recommends the addition of the terms *air embolism* and *fat embolism* to the list of inclusions.

4. The committee recommends the transfer to this title of the terms *infarction of lung* and *pulmonary infarction* from present title No. 94 (*Pulmonary congestions, pulmonary apoplexy*).

83. Diseases of the Veins (Varices, Hemorrhoids, Phlebitis, Etc.).

1. The committee recommends that this title be considered reliable, without autopsy, if there is an accompanying statement of the site of the lesion or name of the vessel or vessels involved.

2. Of the terms now included under this title heading the following only are approved: *Aneurismal varix, endophlebitis, hemorrhoids, periphlebitis, phlebitis* (of a specified vein or sinus), *pylephlebitis, rupture of varicose vein, thrombophlebitis, varices* (location should be specified), *varicocele, varix of bladder, varix of esophagus, varix of pharynx, varix of vulva, venous angioma.*

84. Diseases of the Lymphatic System (Lymphangitis, Etc.).

1. This is a reliable title, without autopsy.

2. In giving *adenitis, lymphadenitis, or lymphangitis* as the cause of death the exact location of the glands or lymph vessels affected should be stated together with, if possible, the etiological factor responsible for the inflammation.

3. Of the terms now included under this title heading the following only are approved: *Adenitis, lymphadenitis, lymphangitis, nonfilarial chylocele, nonfilarial chylous ascites, obliteration of lymphatic vessel, polyadenitis.*

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4. The committee recommends the transfer to other titles of the following inclusions: To new tentative title No. 51B (*Diseases of the thymus gland*): *Atrophy of thymus gland, enlargement of thymus gland, lymphatism, persistent thymus gland, status lymphaticus, status thymicus, thymic asthma.*

85. Hemorrhage; Other Diseases of the Circulatory System.

1. This title is reliable, without autopsy, but the site of the hemorrhage or name of vessel should be specified—also the cause. Any report of *Hemorrhage* should be queried by registration offices and by the Bureau of the Census as to cause and site of lesion.

2. Of the terms now included under this title heading the following only are approved: *Adams-Stokes disease, brachycardia, bradycardia, epistaxis, hemorrhage* (cause and site should be specified—see above), *heart block, paroxysmal tachycardia, Stokes-Adams disease, tachycardia.*

86. Diseases of the Nasal Fossae.

1. Names of diseases listed under this heading are reliable reports of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Adenoids, cerebrospinal rhinorrhea, foreign body in nose.*

3. The committee recommends the transfer of the term *foreign body in nose* to title No. 186 (*Other external violence*).

4. The committee recommends the transfer of the following terms to this title from present title No. 146 (*Diseases of the bones—tuberculosis excepted*): *Abscess of antrum of Highmore, of ethmoidal sinus, of frontal sinus, of maxillary sinus, of sphenoidal sinus, disease of frontal sinus, empyema of frontal sinus, ethmoidal sinusitis, ethmoiditis, frontal sinusitis, maxillary sinusitis, necrosis of antrum, sphenoidal sinusitis, sphenoiditis, suppuration of frontal sinus.*

5. The committee recommends that *coryza* and *coryza of newborn* be queried by registration offices to determine whether the coryza was caused by syphilis, diphtheria, or other specific infection, in which event it should not be tabulated under title No. 86 but under appropriate headings such as *Syphilis* or *Diphtheria*.

87. Diseases of the Larynx.

1. The committee recommends that statements of the diseases included under this title be considered reliable statements of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Catarrh of larynx, catarrh of throat, catarrhal croup, catarrhal laryngitis, congestion of glottis, epiglottiditis, gangrenous laryngitis, infective laryngitis, inflammation of larynx, laryngismus stridulus, laryngitis, edema of glottis, edema of larynx, paralysis of glottis, paralysis of larynx, phlegmonous laryngitis, spasm of glottis, spasm of larynx, spasmodic croup, spasmodic laryngitis, stenosis of larynx, stridulous croup, stridulous laryngitis, tumor of larynx (nonmalignant), ulcerative laryngitis.*

88. Diseases of the Thyroid Body.

1. The committee is of the opinion that this title should not be classified under the class *Diseases of the respiratory system*, and recommends its transfer with reliable inclusions to Class I (*General diseases*). (See tentative title of same name No. 51A.)

89. Acute Bronchitis.

1. This title is not reliable as a cause of death, without autopsy.
2. Of the terms now included under this title heading the following only are approved: *Acute bronchitis, acute bronchorrhoea, acute capillary bronchitis, acute pulmonary catarrh, acute purulent bronchitis, capillary bronchitis, croupous bronchitis, fibrinous bronchitis, subacute capillary bronchitis, tracheitis, tracheobronchitis.*

90. Chronic Bronchitis.

1. This title is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Bronchial catarrh, bronchiectasis, bronchorrhoea, chronic bronchitis, chronic bronchorrhoea, chronic capillary bronchitis, chronic catarrhal bronchitis, dilation of bronchi, fetid bronchitis, peribronchitis, purulent bronchorrhoea, subacute bronchitis, ulcerative bronchitis.*

3. The committee recommends the addition to the list of inclusions of the term *chronic purulent bronchitis*.

4. The committee recommends that a footnote be added to this title stating that the return "*chronic bronchitis*" frequently masks *pulmonary tuberculosis* and *chronic organic heart disease*, as well as other conditions.

91. Bronchopneumonia.

1. The statement is a reliable statement of cause of death, without autopsy.

2. It is the understanding of the committee that the Bureau of the Census has been testing returns of this disease by asking physicians

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in several thousand cases whether *bronchopneumonia* was the primary cause of death or whether it occurred as a complication or sequel of some other disease or abnormal condition. The result of this has been the collection of supplemental data, not on the original certificates, on the basis of which the *bronchopneumonia* was shown to have been the terminal and secondary condition in other diseases. This was found to be the case in about 20 per cent of certificates queried, all of which were those of children under 10 years of age. It is the sense of the committee that the practice the Bureau of the Census now pursues of bringing before the physicians concrete examples of what kind of information is necessary for accurate statistics of cause of death, showing them wherein they have failed to supply such information, is a practical step in the right direction in that its immediate effect is correction of faulty data, and its ultimate effect, if persevered in, will be the improvement of basic facts *at their source*.

Although *bronchopneumonia* is only one of the many returns covered by letters of inquiry now being sent to physicians by the Bureau of the Census, this committee on the accuracy of certified causes of death and their relation to mortality statistics wishes to register here its unqualified approval of the procedure.

3. Of the terms now included under this title heading the following only are approved: *Aspiration pneumonia*, *bronchopneumonia*, *bronchopulmonitis*, *catarrhal inflammation of lung*, *catarrhal pneumonia*, *croupous bronchopneumonia*, *deglutition pneumonia*, *inhalation pneumonia*, *inspiration pneumonia*, *lobular pneumonia*, *septic bronchopneumonia* (query for cause of sepsis).

92. Pneumonia.

1. It is recommended that this title be subdivided; that a subtitle, *Lobar pneumonia* be created, which will be considered reliable, without autopsy, and that this be numbered 92A; subtitle 92B should have the caption *Pneumonia* (undefined), and will be considered unreliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved. The letter following each indicates the tentative subtitle under which each should be listed: *Acute hepatization of lung* (A), *acute inflammation of lung* (A), *acute interstitial pneumonia* (A), *acute pleuropneumonia* (B), *bilateral lobar pneumonia* (A), *bilateral pneumonia* (A), *central pneumonia* (A), *consolidation of lung* (A), *croupous pneumonia* (A), *diplococcus pneumonia* (A), *double pleuropneumonia* (B), *double pneumonia* (A), *fibrinous pneumonia* (A), *hepatization of lung* (A), *lobar pneu-*

monia (A), *septic pleuropneumonia* (query for cause of the sepsis) (B), *solidification of lung* (A), *suppurative pneumonia* (B), *unresolved pneumonia* (A).

3. It is recommended that *pneumococcus pneumonia* be added to the list of inclusions of subtitle A.

4. Inquiry should always be made to determine whether the "*pneumonia*" was *bronchopneumonia* or *lobar pneumonia* and whether it was the primary cause, or occurred in the course of or following some other disease. "*Pneumonia*," unfortunately, is sometimes used in cases where *hypostatic pneumonia* occurred as a terminal condition, and the primary condition in such cases is often not described.

93. Pleurisy.

1. *Pleurisy*, in the opinion of the committee, is a reliable cause of death, without autopsy, but if returned as a cause of death without specified cause, inquiry should be made to ascertain whether it was due to *lobar pneumonia*, *acute rheumatism*, *tuberculosis*, or *traumatism*, and, if the last, whether the violence was accidental, suicidal, or homicidal, and what was the means of injury.

2. Of the terms now included under this title heading the following only are approved: *Chylous hydrothorax*, *diaphragmatic pleurisy*, *double empyema*, *double hydrothorax*, *double pleuritis*, *empyema*, *exudative pleurisy*, *fibrinous pleurisy*, *fibrous pleurisy*, *hemopneumothorax*, *hemothorax*, *hydropneumothorax*, *hydrothorax*, *plastic pleurisy*, *pleurisy with effusion*, *pleuritis*, *pleuropericarditis*, *pneumothorax*, *purulent pleurisy*, *pyopneumothorax*, *pyothorax*, *serofibrinous pleurisy*, *seropurulent pleurisy*, *subacute pleurisy*, *suppurative pleurisy*, *thoracic fistula*.

94. Pulmonary Congestion, Pulmonary Apoplexy.

1. It is recommended that title No. 94 be called *Pulmonary congestion* (3 months and over), and that the other name included in the present title, *pulmonary apoplexy*, be listed among the terms below. *Pulmonary congestion* is considered reliable, without autopsy, only when the cause is specified—as for example, *accidental inhalation of irritating fumes*, or accompanying lesions which are known to lead to congestion of the lungs.

2. Of the terms now included under this title heading, the following only are approved: *Apoplexy of lung*, *congestion of lung*, *hypostatic congestion of lung*, *hypostatic pneumonia*, *edema of lung*, *passive congestion of lung*, *pulmonary apoplexy*, *pulmonary congestion*, *pulmonary edema*, *pulmonary stasis*.

3. The committee recommends the transfer of the following terms to other titles: *Infarction of lung, pulmonary infarction* to title No. 82 (*Embolism and thrombosis*).

4. The committee recommends that an age qualification be placed upon this title, namely, *3 months and over*, and that deaths of infants under 3 months of age reported from any of its included terms be classified under present title No. 152, subtitle 2 (*Other diseases of early infancy*).

5. Reports of the conditions listed under this heading should always be queried for the primary cause.

95. Gangrene of the Lung.

1. *Gangrene of the lung*, is, in the opinion of the committee, in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Gangrene of the lung, pulmonary gangrene*.

96. Asthma.

1. The committee recommends that this title be considered not reliable, without autopsy, and that it be queried in every instance for cause.

2. Of the terms now included under this title heading the following only are approved: *Asthma, asthmatic bronchitis, bronchial asthma, catarrhal asthma, Curschmann's disease, spasmodic asthma*.

97. Pulmonary Emphysema.

1. In the opinion of the committee this is a reliable statement of cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Congenital emphysema, emphysema of lung, hypertrophic emphysema, interlobular emphysema, pulmonary emphysema, senile emphysema, vesicular emphysema*.

98. Other Diseases of the Respiratory System (Tuberculosis excepted).

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its reliability, without autopsy.

2. The committee recommends that the parenthetical expression (*tuberculosis excepted*) be omitted from the title heading and that to the note now following the list of inclusions be added *or tuberculosis of respiratory organs*.

3. Of the terms now included under this title heading the following only are approved inclusions: *Abscess of lung* (only with cause stated), *anthracosis of lung*, *aspergillosis of lung*, *axe-grinders' disease*, *chronic hepatization of lung*, *chronic inflammation of lung*, *chronic interstitial inflammation of lung*, *chronic interstitial pneumonia*, *chronic pleuropneumonia*, *chronic pneumonia*, *chronic pneumonitis*, *colliers' lung*, *grinders' asthma*, *hay asthma*, *hay fever*, *hernia of lung*, *interstitial pneumonia*, *miners' asthma*, *pneumoconiosis*, *potter's asthma*, *pulmonary abscess* (only with cause stated), *pulmonary anthracosis*, *stenosis of bronchi*, *stenosis of trachea*, *stonemasons' lung*, *tracheostenosis*, *tumor of lung* (nonmalignant), *tumor of pleura* (nonmalignant), *tumor of trachea* (nonmalignant), *ulcer of bronchi*, *ulcer of trachea*.

4. The committee recommends that the following terms be added to the list of inclusions: *Metal polishers' disease*, *tumor of bronchi* (nonmalignant).

5. The committee recommends the transfer of the term *hydatid cyst of lung* to title No. 107 (*Intestinal parasites*).

99. Diseases of the Mouth and Annexa.

1. It is recommended that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Glossitis*, *Mikulicz's disease*, *pyorrhea alveolaris*, *Riggs's disease*, *stomatitis*, *thrush*, *tumor of gum* (nonmalignant), *tumor of lip* (nonmalignant), *tumor of mouth* (nonmalignant),¹ *tumor of parotid gland* (nonmalignant),¹ *tumor of salivary gland* (nonmalignant), *tumor of tongue* (nonmalignant), *ulorrhagia*.

3. The committee recommends the transfer to this title of the term *acute parotitis* (*parotiditis*) [not mumps] from present title No. 19 (*Other epidemic diseases*).

4. The committee recommends the transfer of the following terms: *Muquet*, to title No. 19, the proposed caption of which is *Other epidemic, endemic, and infectious diseases*; *odontoma*, to the prefatory note on nonmalignant tumors preceding title No. 39.

100. Diseases of the Pharynx.

1. It is recommended that the caption of this title be changed to *Diseases of the pharynx and tonsils* and be considered reliable as a cause of death, without autopsy.

2. Of the terms now included under this title heading the following only are approved inclusions: *Abscess of pharynx*, *abscess of tonsil*, *angina Ludovici*, *cellulitis of pharynx*, *follicular amygdalitis*, *fol-*

¹ With specification of nature and exact site.

licular tonsillitis, Ludwig's angina, Ludwig's disease, nasopharyngeal abscess, parenchymatous tonsillitis, peritonsillar abscess, postpharyngeal abscess, quinsy, retropharyngeal abscess, septic disease of throat, septic sore throat, streptococcic sore throat, stricture of pharynx (with cause of stricture and manner of death stated, e. g., starvation), suppurative tonsillitis, tonsillopharyngeal abscess, tumor of pharynx (nonmalignant), tumor of throat (nonmalignant), tumor of tonsil (nonmalignant), tumor of uvula (nonmalignant), Vincent's angina.

3. The committee recommends that the term *tumor of fauces* (non-malignant) be added to the list of inclusions.

101. Diseases of the Esophagus.

1. The committee is of the opinion that this title should be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of esophagus, obstruction of esophagus, stenosis of esophagus, stricture of esophagus, tumor of esophagus (nonmalignant).*

3. Returns of *stricture of* and *stenosis of the esophagus*, without qualification, should be queried to ascertain whether due to congenital stenosis, cicatricial contraction or tumor of the esophagus, to pressure from surrounding parts, or other discernible cause.

4. The committee recommends the transfer of the term *foreign body in esophagus* to title No. 186 (*Other external violence*).

102. Ulcer of the Stomach.

1. The committee recommends that the caption of this title be changed to *Ulcer of stomach or duodenum*, and that it be considered unreliable unless verified by autopsy or operation.

2. Of the terms now included under this title heading the following only are approved: *Gastric ulcer, gasiro-duodenal ulcer, gastro-esophageal ulcer, peptic ulcer, perforating gastric ulcer, perforating ulcer of stomach, round ulcer of stomach, ulcer of pylorus, ulcer of stomach, ulcus rotundum, ulcus ventriculi.*

3. The committee recommends that the terms *duodenal ulcer* and *ulcer of duodenum* be transferred to this title from titles Nos. 104 and 105 (*Diarrhea and enteritis*).

103. Other Diseases of the Stomach (Cancer Excepted).

1. The committee recommends that the caption of this title be changed to *Other diseases of the stomach* and that to the footnote beginning *This title does not include*, be added the words *tuberculosis of the stomach* (31). In the opinion of the committee the title is not reliable unless verified by autopsy or operation.

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2. Of the terms now included under this title heading the following only are approved: *Abscess of stomach*, *cardiospasm* (for children under 1 year of age), *gangrene of stomach*, *hematemesis* (with etiology), *hemorrhagic gastritis*, *hypertrophic stenosis of pylorus*, *laceration of stomach* (not external violence; with etiology and fatal symptoms), *obstruction of pylorus* (with etiology), *perforation of stomach* (nontraumatic; with etiology), *phlegmonous gastritis*, *pylorospasm* (for children under 1 year of age), *rupture of stomach* (nontraumatic; with etiology), *stenosis of pylorus* (nonmalignant; with etiology), *stricture of cardia of stomach* (nonmalignant; with etiology), *stricture of pylorus* (nonmalignant; with etiology), *stricture of stomach* (nonmalignant; with etiology), *vomiting of blood*.

3. The committee recommends that the term *tumor of stomach* (nonmalignant) be added to the list of inclusions.

4. The committee recommends that the term *foreign body in stomach* be transferred to title No. 186 (*Other external violence*).

104. Diarrhea and Enteritis (Under 2 Years).

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Catarrhal colitis* (state whether acute or chronic), *catarrhal diarrhea* (state whether acute or chronic), *catarrhal enteritis* (state whether acute or chronic), *catarrhal gastroduodenitis* (state whether acute or chronic), *catarrhal gastroenteritis* (state whether acute or chronic), *catarrhal ileocolitis* (state whether acute or chronic), *croupous colitis*, *croupous enteritis*, *diarrhea due to food*, *endemic diarrhea*, *enteritis*, *enterocolitis* (-2y), *gastroenteritis* (-2y), *hemorrhagic colitis*, *hemorrhagic enteritis*, *hemorrhagic gastroenteritis*, *ileocolitis* (-2y), *infantile diarrhea*, *infantile enteritis*, *membranous colitis*, *membranous enteritis*, *membranous enterocolitis*, *membranous ileocolitis*, *mucoenteritis*, *necrotic colitis*, *perforating ulcer of intestine* (with autopsy), *phlegmonous enteritis*, *sarcinal infection* (with proof), *sigmoiditis* (with proof), *ulcer of colon* (with autopsy), *ulcer of intestine* (with autopsy), *ulceration of colon*, *ulceration of ileum*, *ulceration of intestine*, *ulcerative colitis*, *ulcerative enteritis*, *ulcerative enterocolitis*, *ulcerative ileocolitis*, *ulcerative perforation of intestine*.

3. The committee recommends that all reports of conditions now listed under title No. 13 (*Cholera nostras*) be classified under this title if encountered on death certificates of children under 2 years of age. It is also recommended that the term *pseudomembranous enteritis* be transferred to this title from title No. 110 (*Other dis-*

eases of the intestines) when reported for children under 2 years of age.

4. The committee recommends the transfer of *duodenal ulcer* and *ulcer of duodenum* to title No. 102 (*Ulcer of the stomach*); *flagellate diarrhea* to title No. 107, the new, tentative caption of which is *Diseases due to other parasitic worms*.

105. Diarrhea and Enteritis (2 Years and Over).

1. The conclusions for the preceding title are in force for this title with the following exceptions: The terms *enterocolitis*, *gastroenteritis*, and *ileocolitis*, without further qualification, are not approved inclusions without autopsy for decedents 2 years of age or over.

106. Ankylostomiasis.

1. The committee recommends that this title be placed in the reliable class, provided the infectious parasite *ankylostoma duodenale* or its ova have been demonstrated.

2. Of the terms now included under this title heading the following only are approved: *Ankylostomiasis*, *hookworm disease*, *necatoriasis*, *uncinariasis*.

3. The committee recommends the addition of the following terms to the list of inclusions: *Infection by ankylostoma duodenale*, *infection by uncinaria americana*, *necator americana*.

107. Intestinal Parasites.

1. The committee recommends that the caption of this title be changed to *Diseases due to other parasitic worms* and be considered reliable only with demonstration of the parasite or its ova in the tissues or discharges. Also that the title be transferred to the class of *General diseases* after present title No. 19.

2. The committee recommends that the title be subdivided into (A) *Infection by cestoda*, (B) *Infection by trematoda*, (C) *Infection by nematoda*, (D) *Infection by coccidia*.

3. Of the terms now under this title heading the following only are approved inclusions:

(A) *Infection by cestoda* (Tapeworm)—

Dibothriocephalus latus.

Bothriocephalus latus.

Tenia echinococcus.

Tenia saginata (Taeniasis; Teniasis).

Tenia solium (Taeniasis; Teniasis).

Cysticercus cellulosae (Taeniasis; Teniasis).

Other cestodes.

(B) *Infection by trematoda* (Distomiasis)—

Fasciola hepatica (Fascioliasis).

Distomum hepaticum.

Paragonimus westermani (Paragonimiasis).

Distomum pulmonale.

Schistosomum hematobium (Bilharziasis) (Schistosomiasis).

Distomum hematobium (Schistosomiasis).

Bilharzia hematobia (Schistosomiasis).

Schistosomum japonicum (Schistosomiasis).

Other trematodes (Schistosomiasis).

(C) *Infection by nematoda* (Round worm)—

Ascaris lumbricoides (ascariasis).

Oxyuris vermicularis (oxyuriasis).

Trichocephalus trichiura (Trichocephaliasis).

Trichocephalus dispar.

Trichinella spiralis (Trichinelliasis, Trichiniasis).

Trichina spiralis.

Filaria (several species) (Filariasis).

Filaria (microfilaria) sanguinis hominis.

Strongyloides stercoralis (Anguilluliasis).

Anguillula intestinalis or *stercoralis*.

Rhabdonema strongyloides or *intestinale*.

Other nematodes.

(D) *Infection by coccidia*—

Coccidiasis.

4. The committee recommends the transfer to this title of the terms *hydatid cyst of lung* from title No. 98 (*Other diseases of the respiratory system*); *cysticercus of brain* and *hydatid of brain* from title No. 74 (*Other diseases of the nervous system*); *echinococcus cyst of liver* from present title No. 112 (*Hydatid tumor of the liver*); *flagellate diarrhea* from titles 104 and 105 (*Diarrhea and enteritis*); *hydatid cyst of spleen* from present title No. 116 (*Diseases of the spleen*); *hydatid cyst of kidney* from title 122 (*Other diseases of the kidneys and annexa*); *hydatid cyst of breast* from present title No. 133 (*Nonpuerperal diseases of the breast*).

108. Appendicitis and Typhlitis.

1. This title is considered unreliable, unless verified by operation or autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of appendix*, *abscess of iliac fossa*, *abscess of vermiform appendix*, *appendicitis*, *appendicular abscess*,

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fulminating appendicitis, gangrenous appendicitis, perforative appendicitis, pericecal abscess, perityphlitic abscess, perityphlitis, post-cecal abscess, recurrent appendicitis, ruptured appendix, sloughing appendix, suppurative appendicitis, typhlitis, typhlodididitis.

3. The committee recommends that the term *foreign body in appendix* be transferred to this title from title No. 110 (*Other diseases of the intestines*).

109. Hernia, Intestinal Obstruction.

CONCLUSIONS ON SUBTITLE 1—HERNIA.

1. This subtitle is considered reliable if the hernia is external, or is exposed on operation or autopsy, when internal; also when conditions adequate to cause death, together with type and location of hernia, are specified.

2. Of the terms now included under this subtitle the following only are approved: *Gangrenous hernia, herniotomy, incarcerated hernia, strangulated hernia* (each with site specified).

CONCLUSIONS ON SUBTITLE 2—INTESTINAL OBSTRUCTION.

1. This subtitle is considered unreliable, unless the obstruction is demonstrated on autopsy, or operation, or is accessible by examination through the body orifices.

2. Of the terms now included under this subtitle the following only are approved: *Ileus, intestinal obstruction* (site and cause of obstruction to be specified), *intussusception, strangulation of bowel, telescoped bowel, twist of bowel, volvulus.*

110. Other Diseases of the Intestines.

1. The inclusions under this title heading cover so many conditions that no "blanket" recommendation can be made as to its reliability or unreliability, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of Meckel's diverticulum, diverticulitis, enteric paralysis* (with adequate etiology), *fecal impaction, gangrene of rectum, impaction of feces, ischiorectal abscess, paralysis of colon* (with adequate etiology), *paralysis of intestine* (with adequate etiology), *perforation of bowel* (with adequate etiology), *perforation of intestine* (with adequate etiology), *periproctitis, perirectal abscess, perirectal cellulitis, procidentia recti, rupture of duodenum* (with adequate etiology), *rupture of rectum* (with adequate etiology), *stricture of anus* (with adequate etiology), *stricture of rectum* (with adequate etiology), *tumor of anus* (nonmalignant), *tumor of rectum* (nonmalignant).

3. The committee recommends the transfer of the following inclusions to other titles: *Foreign body in appendix* to title No. 108 (*Appendicitis and typhlitis*); *foreign body in intestine, foreign body in rectum* to title No. 186 (*Other external violence*); *psilosis, sprue* to present title No. 25 (*Mycoses*); *melena* (under 3 months) to title No. 152, subtitle 2 (*Other diseases of early infancy*); *pseudomembranous enteritis* to title No. 104 or 105 (*Diarrhea and enteritis*).

111. Acute Yellow Atrophy of the Liver.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Acute atrophy of liver, acute parenchymatous hepatitis, acute yellow atrophy of liver, icterus gravis, malignant hepatitis* (1y+), *malignant icterus* (1y+), *malignant jaundice* (1y+), *pernicious icterus*.

3. The committee recommends that the terms *acute infective jaundice* and *Weil's disease* be transferred to title No. 19, the proposed caption of which is *Other epidemic, endemic, and infectious diseases*.

112. Hydatid Tumor of the Liver.

1. The committee recommends that this title be eliminated and that the term *echinococcus cyst of liver* be transferred to title No. 107, the new tentative title of which is *Diseases due to other parasitic worms*.

113. Cirrhosis of the Liver.

1. It is recommended that this title be considered in the reliable class, without autopsy, it being understood that where cirrhosis is due to syphilis deaths should be classified under title No. 37 (*Syphilis*); also that in the arrangement of the included terms a subtitle should be established to comprehend alcoholic cirrhosis and synonymous terms. None of the terms listed under this subtitle should be used unless there was a definite history of *chronic alcoholism*.

2. Of the terms now included under this title heading the following only are approved, those followed by the letter (A) to be listed under the subtitle covering *alcoholic cirrhosis*: *Alcoholic cirrhosis* (A), *alcoholic cirrhosis of liver* (A), *atrophic cirrhosis* (A), *atrophic cirrhosis of liver* (A), *cirrhosis of Laënnec, cirrhosis of liver, congenital cirrhosis of liver* (1y+), *congenital hepatic cirrhosis* (1y+), *Hanot's disease, hepatic cirrhosis, hobnail liver* (A), *hypertrophic cirrhosis, hypertrophic cirrhosis of liver*.

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3. The committee recommends that returns of *congenital cirrhosis of liver* be queried for syphilis.

4. The committee recommends the transfer to this title of the term *hypertrophic hepatitis* from title No. 115 (*Other diseases of the liver*).

5. The committee recommends the transfer of the following terms to title No. 55 (*Other general diseases*): *Amyloid degeneration of liver, amyloid liver, lardaceous degeneration of liver, lardaceous liver, large waxy liver, waxy degeneration of liver, waxy liver*.

114. Biliary Calculi.

1. It is recommended that the caption of this title be changed to *Cholelithiasis* and that it be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Biliary colic, biliary lithiasis, cholelithiasis, colic from gall stones, impacted gall stones*.

115. Other Diseases of the Liver.

1. It is the recommendation of the committee that the name of this title be changed to *Other diseases of the liver and biliary system*, and be considered unreliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of gall bladder, abscess of liver* (etiological factor must be specified), *acute catarrhal jaundice* (1y+), *angiocholecystitis, angiocholitis, biliary fistula, catarrh of bile duct, catarrhal cholangitis, catarrhal icterus* (1y+), *catarrhal jaundice* (1y+), *cholangitis, cholecystitis, choledochitis, chronic catarrhal jaundice, diffuse suppurative hepatitis, empyema of gall bladder, gangrene of gall bladder, gangrene of gall duct, hematogenous icterus* (1y+), *hematogenous jaundice* (1y+), *infectious cholecystitis, necrosis of gall bladder, perforation of bile duct* (with cause), *perforation of gall bladder* (with cause), *perforation of gall duct* (with cause), *rupture of bile duct* (with cause), *rupture of gall bladder* (with cause), *rupture of gall duct* (with cause), *stenosis of bile duct* (with cause), *stenosis of gall duct* (with cause), *stricture of common duct* (with cause), *stricture of gall bladder* (with cause), *stricture of gall duct* (with cause), *suppuration of gall bladder, suppurative cholangitis, suppurative cholecystitis, suppurative choledochitis, tumor of bile duct* (nonmalignant), *tumor of gall bladder* (nonmalignant), *tumor of gall duct* (nonmalignant), *tumor of liver* (nonmalignant).

3. The committee recommends the transfer of the following inclusions to other titles: *Hypertrophic hepatitis* to title No. 113 (*Cirrhosis of the liver*), tentative subtitle (B) (*Other cirrheses*); *tropical abscess of the liver* to title No. 14 (*Dysentery*).

116. Diseases of the Spleen.

1. The committee recommends that this title be considered unreliable unless verified by operation or autopsy; it recommends, further, that the title be removed from Class V (*Diseases of the digestive system*) and be inserted between titles No. 52 and No. 53 in the class of *General diseases*. (See tentative title No. 52B.)

117. Simple Peritonitis (Nonpuerperal).

1. It is recommended that the name of this title be changed to *Peritonitis (nonpuerperal)* and that it be placed in the unreliable class, without autopsy; also that all reports under this heading be queried by registration offices and by the Bureau of the Census in order to secure statement of the primary cause.

2. Of the terms now included under this title heading the following only are approved: *Acute general peritonitis, general purulent peritonitis, acute fibrinous peritonitis, acute serofibrinous peritonitis, acute suppurative peritonitis, acute hemorrhagic peritonitis*.

3. The committee recommends the addition of the term *acute fibrinopurulent peritonitis* to the list of inclusions.

4. The committee recommends the transfer of the terms *foreign body in peritoneum* and *traumatic peritonitis* to title No. 186 (*Other external violence*).

5. The committee recommends the transfer of the term *subdiaphragmatic abscess* to this title from present title No. 118 (*Other diseases of the digestive system*).

117A. Diseases of the Pancreas. (Tentative title.)

1. The committee recommends that a new title with the above caption be established to follow present title No. 117, and that the new title be placed in the unreliable class, without autopsy.

2. The committee recommends the transfer to this title of the following terms now listed under title No. 118 (*Other diseases of the digestive system*): *Acute pancreatitis, acute suppurative pancreatitis, acute hemorrhagic pancreatitis, chronic suppurative pancreatitis, chronic interstitial pancreatitis, tumor of pancreas (nonmalignant), abscess of pancreas, acute gangrenous pancreatitis*.

3. The committee recommends the addition of the terms *calculus of pancreatic duct, fat necrosis of pancreas*.

118. Other Diseases of the Digestive System (Cancer and Tuberculosis excepted).

1. It is recommended that this title be eliminated because of the transfer of all its approved inclusions to more appropriate title headings.

2. The committee has recommended the transfer of many inclusions from this title to the new tentative title 117A (*Diseases of the pancreas*), which see.

119. Acute Nephritis.

1. This title should not be accepted as a primary and exclusive cause of death, without autopsy. In all such cases the physician should report the primary condition which led to the nephritis. Reports of it should be queried, therefore, to ascertain whether it appeared as a complication or sequela of some other disease or abnormal condition, and if so the exact nature of the same; it is especially important to query suspected puerperal cases.

2. Of the terms now included under this title heading the following only are approved: *Acute albuminous nephritis, acute diffuse nephritis, acute exudative nephritis, acute Bright's disease, acute glomerulo-nephritis, acute hemorrhagic nephritis, acute interstitial nephritis, acute nephritis, acute parenchymatous nephritis, acute tubular nephritis, glomerular nephritis, glomerulo-nephritis, subacute nephritis.*

3. The committee voted to recommend the transfer to this title of the terms *nephritis* (unqualified) and *Bright's disease* (unqualified) in children under 15 years of age when no information definitely describing the condition as either acute or chronic can be obtained.

120. Bright's Disease.

1. It is recommended that this title be considered in the reliable class, without autopsy,¹ but suggested that the caption be changed to *Chronic nephritis*.

2. Of the terms now included under this title heading the following only are approved: *Cardiorenal sclerosis, chronic Bright's disease, chronic diffuse nephritis, chronic exudative nephritis, chronic glomerulo-nephritis, chronic interstitial nephritis, chronic nephritis, chronic parenchymatous nephritis, chronic tubular nephritis, diffuse nephritis, diffuse interstitial nephritis, gouty kidney, granular kidney, hypertrophic interstitial nephritis, large white kidney.*

¹ It was agreed that in preparing its report on this title the committee would call attention to the very considerable error in diagnoses, without autopsy, of deaths reported from chronic nephritis, with the suggestion that there are good reasons for excluding this from the reliable class.

3. The committee recommends the transfer to other titles of the following terms: *Amyloid degeneration of kidney*, *lardaceous degeneration of kidney*, *waxy degeneration of kidney* to title No. 55 (*Other general diseases*); *purulent nephritis*, *septic nephritis* to title No. 122 (*Other diseases of the kidneys and annexa*).

4. The committee recommends that when *nephritis* (unqualified) or *Bright's disease* (unqualified) are reported as causes of death for children under 15 years of age, and when no information definitely describing the condition as either acute or chronic can be obtained, the deaths be compiled under title No. 119 (*Acute nephritis*).

121. Chyluria.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Chyluria*, *galacturia*, *hematochyluria*, *lipemia*, *lipuria*, *nonflarial chyluria*, *piarrhemia*, *tropical hematuria*.

122. Other Diseases of the Kidneys and Annexa.

1. It is recommended that this title be considered unreliable unless operation or autopsy was performed.

2. Of the terms now included under this title heading the following only are approved: *Abscess of kidney*, *cyst of kidney*, *cystic degeneration of kidney*, *cystic disease of kidney*, *floating kidney*, *hydronephrosis*, *infarct of kidney*, *nephritic abscess*, *perinephric abscess*, *perinephritic abscess*, *perirenal abscess*, *pyelitis*, *pyelonephritis*, *pyonephritis*, *pyonephrosis*, *renal abscess*, *renal cyst*, *suppurative nephritis*, *suppurative pyelitis*, *tumor of kidney* (nonmalignant).

3. The committee recommends that the term *tumor of ureter* (nonmalignant) be added to the list of inclusions.

4. The committee recommends the transfer of the terms *purulent nephritis* and *septic nephritis* to this title from title No. 120 (*Bright's disease*).

5. The committee recommends that the term *hydatid cyst of kidney* be transferred to title No. 107, the proposed caption of which is *Diseases due to other parasitic worms*.

123. Calculi of the Urinary Passages.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Calculus of bladder*, *calculus of kidney*, *calculus of pelvis of kidney*, *calculous pyelitis*, *calculous pyelonephritis*, *calculous pyonephrosis*, *calculus of ureter*, *calculus of urethra*, *impacted*

calculus of kidney, impacted calculus of ureter, impacted calculus of urethra, lithotripsy, nephrolithiasis, pyonephrosis from calculus, renal calculus, renal colic, stone in bladder, stone in kidney, urinary calculus, ureterolithotomy, urinary lithiasis, vesical calculus.

124. Diseases of the Bladder.

1. It is recommended that *Diseases of the bladder* be put into the reliable class, without autopsy, and be subdivided into (A) *Cystitis* and (B) *Other diseases of the bladder*.

2. Of the terms now included under this title heading the following only are approved: *Gangrenous cystitis, purulent cystitis, pyocystitis, suppurative cystitis*, under subtitle (A); and *gangrene of bladder, papilloma of bladder, rupture of bladder (nontraumatic), tumor of bladder (nonmalignant)*, and *vesical abscess* under subtitle (B).

3. The committee recommends the transfer of the term *foreign body in bladder* to title No. 186 (*Other external violence*).

125. Disases of the Urethra, Urinary Abscess, Etc.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Laceration of urethra* (not accidental violence), *rupture of urethra* (not accidental violence), *stricture of urethra*, *tumor of urethra* (nonmalignant).

3. The committee recommends the transfer of the term *foreign body in urethra* to title No. 186 (*Other accidental violence*).

4. A footnote should follow this title stating that it does not include *cancer, tuberculosis, or syphilitic or gonococcic lesions of the genital organs*.

126. Diseases of the Prostate.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Calculus of prostate, enlargement of prostate, hypertrophy of prostate, prostatitis, prostatocystitis, tumor of prostate* (nonmalignant).

3. The committee recommends that the following terms be added to the list of inclusions: *Abscess of prostate, inflammation of prostate, adenoma of prostate, new growth of prostate* (nonmalignant).

4. The committee recommends that a footnote follow this title stating that it does not include *cancer, tuberculosis, or syphilitic or gonococcic lesions of the genital organs*.

127. Nonvenereal Diseases of the Male Genital Organs.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Epididymitis*, *hydrocele*, *hydrocele of spermatic cord*, *hydrocele of tunica vaginalis*, *orchitis*, *phimosis* (not congenital), *spermatocele*, *tumor of penis* (nonmalignant), *tumor of scrotum* (nonmalignant).

3. The committee recommends the addition of the term *tumor of spermatic cord* (nonmalignant) to the list of inclusions.

4. The committee recommends the transfer to title No. 171 (*Traumatism by cutting or piercing instruments*) of the term *circumcision*, and to title 186 (*Other accidental violence*) of the term *traumatic orchitis*.

5. A footnote should follow this title stating that it does not include *cancer*, *tuberculosis*, or *syphilitic* or *gonococcic lesions* of the *genital organs*.

128. Uterine Hemorrhage (Nonpuerperal).

1. It is recommended that this title be stricken out and that all approved inclusions be transferred to title No. 130 (*Other diseases of the uterus*).

2. Of the terms now included under this title heading the following only are approved for transfer as noted above: *Hemorrhage of uterus* (nonpuerperal), *hemorrhage of womb* (nonpuerperal), *hemorrhagic metritis* (nonpuerperal), *intrauterine hemorrhage* (nonpuerperal), *uterine hemorrhage* (nonpuerperal).

129. Uterine Tumor (Noncancerous).

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Fibroid of body of uterus*, *fibroid of cervix of uterus*, *fibroid of uterus*, *fibroma of uterus*, *fibromyoma of uterus*, *polypus of uterus*, *tumor of uterus* (nonmalignant).

3. The committee recommends the transfer of the term *deciduoma* to title No. 42 (*Cancer of the female genital organs*).

130. Other Diseases of the Uterus.

1. It is recommended that this title be placed in the reliable class, without autopsy, with the understanding that when the specific cause is described the death is to be classified thereunder.

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2. Of the terms now included under this title heading the following only are approved: *Endometritis, inflammation of uterus, retroversion of uterus, procidentia of uterus, purulent endometritis, pyometra, septic endometritis* (nonpuerperal), *septic metritis* (nonpuerperal), *septic phlebitis of uterus* (nonpuerperal), *suppurative metritis*.

3. It is recommended that all approved terms under present title No. 128 (*Uterine hemorrhage—nonpuerperal*) be transferred to this title. (See conclusions on title No. 128.)

4. It is recommended that the terms *traumatic metritis* and *rupture of uterus* (nonpuerperal) be transferred to title No. 186 (*Other external violence*).

131. Cysts and Other Tumors of the Ovary.

1. It is recommended that the caption be changed to *Nonmalignant Ovarian tumor*. It is the opinion of the committee that the title should be in the unreliable class, without operation or autopsy.

2. Of the terms now included the following only are approved: *Cyst of ovary, cystic ovary, dermoid cyst of ovary, fibroid of ovary, hematoma of ovary, ovarian cyst, parovarian cyst, tumor of ovary* (nonmalignant).

132. Salpingitis and Other Diseases of the Female Genital Organs.

1. The committee recommends that this title be considered an unreliable statement of cause of death, without autopsy.

2. In the opinion of the committee there should be two subtitles: (A) *Salpingitis*¹ and (B) *Other diseases*. Under (A) the following are approved inclusions: *Purulent salpingitis, pus tube, pyosalpingitis, pyosalpinx, rupture of pus tube, rupture of tubal abscess, ruptured pyosalpinx, salpingitis, salpingo-oophoritis, salpingo-ovaritis, septic salpingitis, suppuration of fallopian tube*. Under (B) the following are approved inclusions: *Cystic oophoritis, cystic ovaritis, hematosalpinx, oophoritis, ovaritis, pyo-oophoritis, rupture of fallopian tube, nonmalignant tumor of broad ligament, of vagina, of vulva*.

133. Nonpuerperal Diseases of the Breast (Cancer Excepted).

1. It is recommended that this title, with a footnote to indicate that it does not include *cancer*, be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Suppuration of breast, suppuration of mammary gland, tumor of breast* (nonmalignant), *tumor of mammary gland* (nonmalignant).

¹All conditions under this subtitle refer to nongonococcal inflammation of the tubes.

3. The committee recommends the transfer of the term *hydatid cyst of breast* to title No. 107 (the proposed caption of which is *Diseases due to other parasitic worms*), and of *Paget's disease of nipple* to title No. 43 (*Cancer and other malignant tumors of the breast*).

Class VII. The Puerperal State. (Present titles 134 to 141.)

The committee recommends that the titles under this class be as follows:

Abortion—reliable, without autopsy.

Puerperal hemorrhage—reliable, without autopsy.

Puerperal septicemia—reliable, without autopsy.

Puerperal albuminuria and convulsions—reliable, without autopsy.

Puerperal phlebitis and embolism—reliable, without autopsy.

Other diseases of pregnancy, labor, and the puerperium—reliable, without autopsy.

The committee recommends that the following terms be included under the title to be known as *Abortion*: *Abortion, accidental abortion, induction of abortion, induction of premature labor, miscarriage, tubal abortion.*

The committee recommends that the following terms be included under the title to be known as *Puerperal hemorrhage*: *Accidental hemorrhage of parturition, accidental hemorrhage of puerperium, adherent placenta, detachment of placenta, hemorrhage after labor, hemorrhage during parturition, hemorrhage from detachment of placenta, hemorrhage from uterus after parturition, hemorrhage from uterus during parturition, hemorrhage (puerperium), malposition of placenta, placenta praevia, postpartum hemorrhage, puerperal hemorrhage, retained membranes, retained placenta, retained secundines, retention of placenta, separation of placenta.*

The committee recommends that the following terms be included under the title to be known as *Puerperal septicemia*: *Postpartum pyemia, postpartum sepsis, postpartum septicemia, puerperal cellulitis, puerperal endometritis, puerperal erysipelas, puerperal fever, puerperal inflammation of uterus, puerperal lymphangitis, puerperal metritis, puerperal metroperitonitis, puerperal metrosalpingitis, puerperal pelvic cellulitis, puerperal pelvic peritonitis, puerperal peritoneal infection, puerperal peritonitis, puerperal periuterine cellulitis, puerperal purulent endometritis, puerperal pyemia, puerperal salpingitis, puerperal sapremia, puerperal sepsis, puerperal septic endometritis, puerperal septic fever, puerperal septic infection, puerperal septic metritis, puerperal septic peritonitis, puerperal septicemia, puerperal suppurative metritis.*

The committee recommends that the following terms be included under the title to be known as *Puerperal albuminuria and convul-*

sions: *Eclampsia gravidarum*, *eclampsia of labor*, *eclampsia of pregnancy*, *postpartum eclampsia*, *postpuerperal nephritis*, *puerperal albuminuria*, *puerperal convulsions*, *puerperal eclampsia*, *puerperal nephritis*, *puerperal toxemia*, *puerperal uremia*, *toxemia of pregnancy*, *uremia of pregnancy*.

The committee recommends that the following terms be included under the title to be known as *Puerperal phlebitis and embolism*: *Puerperal embolism*, *puerperal embolism of lung*, *puerperal phlebitis*, *phlegmasia alba dolens*, *sudden death from cardiac embolism after delivery*, *sudden death from cardiac thrombosis after delivery*, *sudden death from cerebral hemorrhage after delivery*, *sudden death from entrance of air into vein after delivery*, *sudden death from pulmonary embolism after delivery*, *sudden death from pulmonary thrombosis after delivery*, *venous thrombosis consequent on parturition*.

The committee recommends that the following terms be included under the title to be known as *Other diseases of pregnancy, labor, and the puerperium*: *Abdominal pregnancy*, *antepartum hemorrhage*, *ectopic gestation*, *ectopic pregnancy*, *emesis gravidarum*, *hyperemesis gravidarum*, *hyperemesis of pregnancy*, *persistent vomiting (pregnancy)*, *puerperal vomiting*, *tubal pregnancy*, *uncontrollable vomiting of pregnancy*, *vomiting of pregnancy*, *breech presentation (mother)*, *Cæsarian section*, *delayed delivery (mother)*, *difficult labor (mother)*, *dystocia (mother)*, *laceration of cervix (parturition)*, *laceration of perineum (parturition)*, *laceration of peritoneum (parturition)*, *laceration of urinary bladder (parturition)*, *laceration of uterus (parturition)*, *laceration of vagina (parturition)*, *laceration of vulva (parturition)*, *prolonged labor (mother)*, *protracted labor (mother)*, *rupture of bladder (parturition)*, *puerperal insanity*, *puerperal mania*, *puerperal melancholia*, *rupture of uterus*, and all terms listed under present title 141 (*Puerperal diseases of the breast*).

142. Gangrene.

1. The committee recommends that this title be considered in the reliable class, without autopsy, if there is an accompanying statement of the site and nature of the original infection.

2. The following terms are approved inclusions: *Cancrum oris*, *dermatitis gangrenosa*, *dry gangrene*, *gangrene (nontraumatic—site of lesion must be specified)*, *malignant edema*, *moist gangrene*, *noma of mouth*, *noma of vulva*, *phagedena of penis*, *phagedena of vulva*, *Raynaud's disease*.

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3. The committee recommends the transfer to this title of the term *cinthum* from title No. 149, the present caption of which is *Other diseases of the organs of locomotion*.

143. Furuncle.

1. The committee recommends that this title be considered in the reliable class, without autopsy, if there is an accompanying statement of the site and nature of the original infection.

2. The following terms are approved inclusions: *Carbuncle* (site must be specified), *furunculosis*, *multiple carbuncle*.

144. Acute Abscess.

1. The committee recommends that this title be considered in the reliable class, without autopsy, if there is an accompanying statement of the site and nature of the original infection.

2. Inasmuch as an abscess at any specified location may be insufficient to cause death by itself, supplementary data as to the site and nature of the original infection should be supplied. Hence, a list of approved terms to be included under this title is omitted, as there is no limit to the number of places or the variety of organs which may be afflicted by inflammatory abscess processes.

145. Other Diseases of the Skin and Annexa.

1. In the opinion of the committee this title should be considered in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following are approved: *Bedsore* (site must be specified), *chronic ulcer* (site must be specified), *decubitis*, *dermatitis venenata*, *ecthyma*, *herpes zoster*, *eczema*, *malignant pemphigus*, *pemphigus*, *pemphigus neonatorum*, *sclerodermia*, *shingles*, *zona*.

3. The committee voted to suggest the addition of the following footnote to this title: Inasmuch as any one of the great number of skin diseases may lead to death through the development of secondary sepsis, it has seemed inadvisable to extend further the list of inclusions under this title, since it would be necessary to include a very great number of dermatological terms to make the list complete.

146. Diseases of the Bones (Tuberculosis Excepted).

1. A footnote should follow the title explaining all it does not include rheumatism and tuberculosis; also that where diseases of the bone affect structures connected with the special senses—nasal fossae, ear, orbit—they are to be referred to the appropriate headings covering diseases of these organs of special sense. The title is in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Caries of bone*, *circumscribed periostitis*, *diffuse periostitis*, *gangrene of bone*, *infective osteomyelitis*, *infective periostitis*, *necrosis of bone* (site specified), *osteitis deformans*, *osteomyelitis*, *osteoperiostitis*, *periostitis* (site specified), *spontaneous fracture of bone*, *suppurative osteomyelitis* (site specified), *suppurative periostitis* (site specified), *tumor of bone* (site specified).

3. The committee recommends the transfer of the following terms to title No. 76 (*Diseases of the ears*): *Abscess of mastoid process*, *disease of mastoid cell*, *empyema of mastoid process*, *mastoid abscess*, *mastoiditis*, *necrosis of mastoid*; it further recommends the transfer of the following terms to title No. 86 (*Diseases of the nasal fossae*): *Abscess of antrum of Highmore*, *abscess of ethmoidal sinus*, *abscess of frontal sinus*, *abscess of maxillary sinus*, *abscess of sphenoidal sinus*, *disease of frontal sinus*, *empyema of frontal sinus*, *ethmoidal sinusitis*, *ethmoiditis*, *frontal sinusitis*, *maxillary sinusitis*, *necrosis of antrum*, *sphenoidal sinusitis*, *sphenoiditis*, *suppuration of frontal sinus*; it further recommends the transfer of the following terms to title No. 186 (*Other external violence*): *Foreign body in antrum of Highmore*, *foreign body in frontal* (and other sinuses); it further recommends the transfer of the term *osteoma* to the list of nonmalignant tumors, given in the prefatory note on cancers and tumors.

4. The committee recommends the transfer to this title of the following terms from title No. 36 (*Rickets*): *Achondroplasia*, *hypertrophic osteoarthropathy*, *pulmonary osteoarthropathy*.

147. Diseases of the Joints (Tuberculosis and Rheumatism Excepted).

1. The committee recommends that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Abscess of joint* (specify joint), *infective synovitis* (site specified), *polyarthrits* (nonvertebral) (site and etiological factor to be specified), *purulent arthritis*, *purulent synovitis*, *septic arthritis*, *suppurative synovitis*.

148. Amputations.

1. The committee recommends that this title be eliminated. The terms included under it are vague and unsatisfactory returns of cause of death. If encountered, they should be queried for the causes for the relief of which the operations were performed and assigned on the basis of information so secured; if no further data can be obtained, they should be classified as deaths of which the causes are not specified; i. e., under present title No. 189.

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149. Other Diseases of the Organs of Locomotion.

1. In the opinion of the committee this title should be under the heading of *Diseases of the muscles, tendons, and their annexa*. The new title is reliable, without autopsy, but in the case of each inclusion except *spasmodic torticollis* and *torticollis* the site of the lesion and the primary cause of the inflammation should be specified.

2. The committee recommends the transfer of *myotonia congenita* and *Thomsen's disease* to title No. 74 (*Other diseases of the nervous system*) and of *ainhum* to title No. 142 (*Gangrene*).

3. Approved inclusions are: *Abscess of bursa*, *abscess of muscle*, *abscess of tendon*, *amyotonia congenita*, *bursal cyst*, *bursitis*, *infective myositis*, *inflammation of bursa*, *inflammation of fascia*, *of muscle*, *of sheath of tendon*, *muscular dystrophy*, *myositis*, *myositis fibrosa*, *myositis ossificans*, *new growth of bursa (nonmalignant)*, *new growth of tendon (nonmalignant)*, *polymyositis*, *progressive ossifying myositis*, *spasmodic torticollis*, *tenontosynovitis*, *tenosynovitis*, *tenotomy*, *thecal abscess*, *torticollis*, *tumor of bursa*, *tumor of sheath of tendon*, *tumor of tendon*.

4. The committee recommends the transfer of the term *myasthenia gravis* to this title from title No. 63 (*Other diseases of the spinal cord*).

150. Congenital Malformations (Stillbirths not included).

1. The committee recommends that subtitle No. 1 (*Hydrocephalus*) be considered in the reliable class, without autopsy.

2. The following inclusions are approved: *Chronic hydrocephalus*, *congenital cerebral tumor*, *congenital hydrocephalus*, *congenital tumor of brain*, *hydrocephalus of brain*, *megalocephalus*.

3. The committee recommends that the subtitle *Congenital malformations of the heart* be placed in the reliable class, without autopsy.

4. Of the terms now included under subtitle 2 (*Congenital malformations of the heart*), the following only are approved: *Atelocardia*, *congenital heart disease*, *congenital malformation of heart*, *congenital valvular heart disease*, *cyanosis (due to malformation of heart)*, *cyanosis (persistence of foramen ovale)*, *cyanosis (from nonclosure of ductus arteriosus or duct of Botalli)*, *morbus caeruleus*, *patent ductus arteriosus*, *patent foramen ovale*.

5. The committee recommends that subtitle No. 3 (*Other congenital malformations*) be considered in the reliable class, without autopsy, except that for certain inclusions data should be supplied as indicated in the following list. Of the terms now included under subtitle No. 3 the following only are approved: *Cerebral hernia (congenital)*, *cerebral meningocele*, *cleft palate*, *congenital amputation*

(reliable if part designated), *congenital atresia* (reliable if part designated), *congenital cystic disease of kidney*, *congenital fracture* (reliable if designated fully), *congenital imperforate urethra*, *congenital intestinal obstruction*, *congenital laryngeal stenosis*, *congenital pyloric stenosis*, *congenital spina bifida*, *congenital stenosis*, *congenital stenosis of intestine*, *congenital stenosis of larynx*, *congenital tumor* (reliable if location and nature of, are stated), *ectopia* (reliable if part stated), *ectopia of bladder*, *ectopia vesicae*, *encephalocele*, *extrophy of bladder*, *extroversion of bladder*, *fissure of lip* (harelip), *fissure of palate*, *fissure of spinal column*, *harelip*, *hemicephalus*, *hydroencephalocele*, *hydromyelia*, *hydromyelocele*, *hydrorrhachis*, *imperforate anus*, *imperforate pharynx*, *imperforate rectum*, *malformation* (reliable if specified), *meningocele*, *meningomyelocele*, *microcephaly*, *omphalocele*, *podencephalus*, *spina bifida*, *spinal hernia*, *spinal meningocele*, *syringomyelocele*.

151. Congenital Debility, Icterus, and Sclerema.

1. The committee recommends that the title heading be changed to *Premature birth, infantile diseases of the liver and jaundice, and malnutrition*.

2. Further recommendation is that the following subtitles be established: (1) *Premature birth*, (2) *Infantile diseases of the liver and jaundice*, (3) *Malnutrition*, (4) *Ill-defined diseases of nutrition, malnutrition from unknown cause*. The approved inclusions under Subtitle No. 1 are: *Accidental abortion*, *immaturity*, *miscarriage*, *premature birth*, *prematurity*. Subtitle No. 1 is considered reliable, without autopsy. The approved inclusions under subtitle No. 2 are: *Acute catarrhal hepatitis* (under 1 year), *acute catarrhal jaundice* (under 1 year), *Buhl's disease*, *congenital cirrhosis of liver* (under 1 year), *congenital cirrhosis*, *congenital icterus*, *hematogenous jaundice* (under 1 year), *hematogenous icterus* (under 1 year), *icterus* (under 1 year), *icterus neonatorum*, *icterus of newborn*, *jaundice* (under 1 year), *jaundice of newborn*. Subtitle No. 2 is considered unreliable, without autopsy. Under subtitle No. 3 the approved inclusions are: *Artificial feeding*, *bottle feeding*, *improper food*, *malassimilation*, *want of breast milk*, *marasmus*. Subtitle No. 3 is considered unreliable, without autopsy. The committee did not approve a list of inclusions for subtitle No. 4. This is the residual subtitle, and the terms included under it are all of a more or less vague and unsatisfactory character. It is in the unreliable class.

3. The committee recommends the transfer of the following terms: *Hepatitis of the newborn* to title No. 37 (*Syphilis*); *sclerema*, *sclerema neonatorum*, and *congenital sclerema* to title No. 152, subtitle 2 (*Other diseases peculiar to early infancy*).

152. Other Causes Peculiar to Early Infancy.

1. It is recommended that subtitle No. 1 (*Injuries at birth*) be placed in the reliable class, without autopsy.

2. Of the terms now included under the subtitle *Injuries at birth*, the following only are approved inclusions: *Breech presentation*, *Cæsarean operation*, *cephalematoma*, *cephalic hemorrhage* (at birth), *cerebral compression* (injury at birth), *cerebral hemorrhage* (injury at birth), *cerebral pressure* (injury at birth), *compression during birth*, *compression of brain* (injury at birth), *compression of umbilical cord*, *delayed confinement*, *delayed delivery*, *dystocia*, *foot presentation*, *forced delivery*, *forceps operation*, *hematoma of brain*, *hemorrhage of scalp* (injury at birth), *instrumental delivery*, *malpresentation*, *placenta prævia*, *podalic version*, *prolapse of funis*, *prolapse of umbilical cord*, *prolonged labor*, *protracted dry birth*, *protracted labor*, *rupture of brain* (incident to birth), *strangulation of umbilical cord*, *transverse presentation*, *vectis* (use of), *version*.

3. Of the terms now included under the subtitle *Other causes peculiar to early infancy*, the following only are approved: *Atelectasis*, *atelectasis neonatorum*, *atelectasis of newborn*, *cellulitis of umbilicus* (under 3 months), *gangrene of umbilical cord*, *hemorrhage of funis*, *hemorrhage of navel*, *hemorrhage of newborn*, *hemorrhage of umbilical cord*, *hemorrhage of umbilicus*, *infected navel*, *infected umbilicus*, *infectious omphalitis*, *melena neonatorum* (see 110), *omphalitis*, *phlebitis of umbilicus*, *postnatal asphyxia*, *septicemia from navel*, *septicemia of umbilicus*, *Winckel's disease*. These inclusions should be considered reliable, without autopsy.

4. The committee recommends the transfer of the following terms from other titles: *All terms now listed under title No. 94 (Pulmonary congestion, pulmonary apoplexy) when reported for infants under 3 months of age*; *melena* from title No. 110 when reported for infants under 3 months of age, *sclerema*, *sclerema neonatorum*, and *congenital sclerema* from present title No. 151 (*Congenital debility, icterus, and sclerema*).

5. The committee recommends the transfer of the term *hemophilia neonatorum* from this title to title No. 55 (*Other general diseases*).

153. Lack of Care.

1. It is recommended that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading, the following only are approved: *Desertion* (newborn), *exposure to cold* (under 3 months), *lack of care*.

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154. Senility.

1. The committee considers this a very unsatisfactory title and not reliable as a cause of death, without autopsy. It should always be queried for the *disease causing death*, as it is too often used on death certificates of elderly persons whose deaths should have been reported as due to diseases of various organs.

2. It is recommended that this title be subdivided into (1) *Senility accompanied by dementia or by other forms of mental alienation (over 70)*; (2) *Senility—others of this class*. Under subtitle No. 1 the committee recommends as approved inclusions the terms *dementia of old age*, *senile dementia*, *senile insanity*, *senile paresis*, *senile psychosis*, *senile melancholia*. Under subtitle No. 2 the approved terms are *morbus senilis*, *old age*, and *senility*. The committee declares its reason for recommending that these subtitles be established to be as follows: It believes that many of the deaths reported from hospitals for the insane as due to *senile dementia*, *senile insanity*, *senile paresis* and similar terms are more properly chargeable to title No. 68 (*Other forms of mental alienation*) than they are to *Senility*. These, however, are so numerous that the transfer of all such cases to title No. 68 would make a very great difference in the number of deaths classified under both titles 68 and 154, and a corresponding difference in the published death rates. The subdivisions, as now recommended, will enable anyone who so desires to ascertain the number of deaths reported from *senility* accompanied by *mental alienation*.

Conclusions on Suicides as a Class.

The committee has been advised that no death is classified in the annual mortality statistics published by the Bureau of the Census as a *suicide* unless the *fact* of suicide is shown, either on the transcript of the death certificate as received by the bureau or through information obtained by an inquiry sent out to determine the matter. The committee desires to express its approval of this practice.

155. Suicide by Poison.

1. It is suggested that the name of this title be changed to *Suicide by ingestion of poisonous solids and liquids*. It is in the reliable class, without autopsy, if the character of the solid or liquid is specified.

2. Of the terms now included under this title heading the following only are approved: *Poisoning* (suicidal), *suicide by poison* (any solid or liquid).

156. Suicide by Asphyxia.

1. It is recommended that the name of this title be changed to *Suicide by inhalation of poisonous gases* and that it be placed in the reliable class, without autopsy, if the character of the gas is specified.

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2. Of the terms now included under this title heading the following only are approved: *Suicide by asphyxia* (any gas or vapor), *suicide by carbon monoxide*, *suicide by chloroform* (vapor), *suicide by gas* (any gas), *suicide by illuminating gas*, *suicide by inhalation of gas* (any gas or vapor), *suicide by suffocation* (any gas or vapor).

157. Suicide by Hanging or Strangulation.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Suicide by hanging*, *suicide by strangulation*.

158. Suicide by Drowning.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Suicide by drowning*, *suicide by submersion*.

159. Suicide by Firearm.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Suicide by firearms*, *suicide by shooting*.

160. Suicide by Cutting or Piercing Instrument.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Suicide by cutting instrument*, *suicide by cutting throat*, *suicide by piercing instrument*.

3. The committee recommends the addition of the following terms: *Suicide by cutting artery*, *suicide by cutting blood vessel*.

161. Suicide by Jumping from High Place.

1. The committee recommends that this title be considered reliable, without autopsy.

2. The committee approves the retention of the only term now listed, *suicide by jumping from high place*.

162. Suicide by Crushing.

1. The committee recommends that this title be in the reliable class, without autopsy.

2. Of the terms now included under this title heading all are approved: *Suicide by crushing*, *suicide by jumping before train*, *suicide by jumping before other vehicles*.

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163. Other Suicides.

1. The committee recommends that this title be considered reliable, without autopsy.

2. The committee recommends that registration and compiling offices query all reports of *Suicide*, without further qualification, to ascertain the manner of death or the means employed. With this information *each* death covered by this return can be classified under one of the titles relating to suicide by specified means.

3. Of the terms now included under this title the following only are approved: *Suicide* (unqualified), *suicide by burns*, *suicide by fire*, *suicide by scalds*.

164. Poisoning by Food.

1. This title should be considered unreliable without supporting data either as to a group of accompanying cases or the ingestion of the particular poisonous substances.

2. Of the terms now included under this title heading the following only are approved: *Botulism*, *cheese poisoning*, *egg albumen poisoning*, *fish poisoning*, *meat poisoning*, *milk poisoning*, *mushroom poisoning*, *pork poisoning* (not due to trichinosis), *potato poisoning*, *sausage poisoning* (not due to trichinosis), *shellfish poisoning*.

165. Other Acute Poisonings.

1. It is recommended that the caption of this title be changed to *Other acute accidental poisonings* (gas excepted). This title, in the opinion of the committee, should be considered unreliable, without autopsy, unless there are supporting data. All returns which do not specify that the poisoning was accidental should be queried by registration and compiling offices. In this way many reports will be found to represent cases that are properly chargeable to suicide or homicide.

2. In the opinion of the committee there should be two subtitles: (A) *Poisonous bites*, to include the approved terms, *bite of insect*, *bite of venomous serpent*, *bite of viper*, *snake bite*, *venom of animal*, *venom of centipede*, *venomous bite*; and (B) *Other acute accidental poisonings* (gas excepted), to include the approved terms: *Accidental poisoning* (only when kind of poison is specified), *acute ergotism*, *acute poisoning* (only when kind of poison is specified), *opium narcosis*, *poisoned wound* (not simply septic poisoning), *poisoning*, *serum intoxication*, *serum poisoning*.

N. B. All of the above to be qualified to show accidental character.

3. It is recommended that the following footnote be added: This title does not include septic poisoning.

166. Conflagration.

1. The committee recommends that this title be considered reliable, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Conflagration* (to include all injuries of whatsoever nature resulting therefrom), *crushed at fire* (conflagration), *inhalation of smoke* (burning building), *jumped from burning building*, *suffocation* (burning building).

3. The committee recommends that the following terms be added to the list of inclusions: *Prairie fire*, *forest fire*.

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

167. Burns (Conflagration Excepted).

1. The committee recommends that the name of this title be *Accidental burns* and that it be placed in the reliable class, without autopsy, but that returns of *Burns* be queried to determine whether they were received in burning buildings or otherwise; also that a footnote be added stating that it does not include deaths from burns received in burning buildings.

2. Of the terms now included under this title heading the following only are approved: *Burn* (conflagration excepted, of any organ or part), *burn by boiling liquid*, *burn by boiling water*, *burn by coal oil*, *burn by corrosive substance*, *burn by fire*, *burn by gasoline*, *burn by kerosene*, *burn by petroleum*, *burn by steam*, *burn by sulphuric acid*, *burn by vitriol*, *effects of corrosives*, *explosion of lamp*, *lamp accident*, *scald* (of any part of body), *scald by steam*.

3. The following terms, now listed under this title heading, should, in the opinion of the committee, be classified under title No. 186 (*Other external violence*) if encountered; they are seldom, if ever, causes of death: *Dermatitis actinica*, *dermatitis ambustionis*, *effects of radium*, *X-ray burns*.

4. The committee recommends that the term *burn by molten metal* be added to the list of inclusions.

5. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

168. Absorption of Deleterious Gases (Conflagration excepted).

1. It is recommended that the name of this title be changed to *Suffocation and accidental inhalation of poisonous gases*; that it be placed in the reliable class, without autopsy, and that it be followed

by a footnote stating that it does not include deaths in burning buildings. The committee also recommends that all reports that do not specify that the poisoning was accidental be queried by registration and compiling offices. In this way many returns will be found to represent cases that are properly chargeable to suicide or homicide.

2. The committee recommends that two subtitles be established, namely, (A) to be called *Suffocation* and (B) *Accidental inhalation of poisonous gases*. Of the terms now included under this title heading the following only are approved; and all are assignable to subtitle (B) with the exception of those specified as coming under (A): *Accidental asphyxia* (gas to be stated), *acetylene poisoning*, *acute etherism*, *ammonia poisoning*, *amyl nitrite poisoning*, *chloroform anesthesia*, *anesthetic*, *anesthetic for operation* (unqualified), *asphyxia* (accidental), *asphyxia by fumes*, *asphyxia by gas* (accidental), *asphyxia by smoke* (conflagration excepted), *bisulphide of carbon poisoning*, *carbon bisulphide poisoning*, *carbon dioxide poisoning*, *carbon monoxide poisoning*, *charcoal fumes*, *chloroform* (vapor), *choke damp poisoning* (not in mines), *coal-gas poisoning*, *cordite poisoning* (vapor), *cyanogen poisoning*, *delayed chloroform poisoning* (vapor), *ether* (vapor), *hydrogen sulphide*, *illuminating gas*, *laughing gas*, *marsh gas*, *nitrous oxide*, *noxious vapors or effluvia* (including those produced by explosives), *sewer-gas poisoning*, *sewer poisoning*, *suffocation* (unqualified), (A), *suffocation by smoke* (conflagration excepted), *sulphuretted hydrogen*, *water gas*, *overlain* (A), *suffocation by abnormal atmospheric pressure* (A).

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

169. Accidental Drowning.

1. The committee recommends that this title be placed in the reliable class, without autopsy, but suggests that returns of *Drowning* be queried to determine whether the death was accidental, suicidal, or homicidal.

2. Of the terms now included under this title heading the following only are approved: *Accidental drowning*, *accidental submersion*, *asphyxia by drowning*, *drowning* (unqualified), *found drowned* (open verdict), *lost at sea*, *suffocation by drowning*, *suffocation by submersion*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

170. Traumatism by Firearm.

1. In the opinion of the committee the name of this title should be *Accidental traumatism by firearms*. This title is unreliable, without supporting data, such as site and extent of injury. The committee also recommends that all reports that do not specify that the traumatism was accidental be queried by registration and compiling offices to determine whether death was accidental, suicidal, or homicidal.

2. All of the following terms as now included are accepted as properly chargeable to this title if no further information be obtainable, but each should be defined as accidental; otherwise there is always doubt as to correct classification: *Accidental wound by firearms* (of any part of body), *firearms*, *gunshot*, *pistol wound*, *shooting*, *shot*, *traumatism by firearms*, *wound by firearms*.

171. Traumatism by Cutting or Piercing Instrument.

1. The committee recommends that the title be called *Accidental traumatism by cutting or piercing instrument*, and that it be considered unreliable, without supporting data, such as site and extent of injury. It is also recommended that all reports that do not specify that the traumatism was accidental be queried by registration and compiling offices to determine whether death was accidental, suicidal, or homicidal:

2. All of the following terms, as now included, are approved as properly chargeable to this title, if no further information is obtainable, but each should be defined as accidental; otherwise there is always doubt as to correct classification. *Cut* (of any part of body), *incised wound* (of any part of body), *knife cut*, *knife stab* (accidental), *punctured wound* (of any part of body), *stab wound* (of any part of body, accidental), *traumatism by cutting instrument*, *traumatism by piercing instrument*, *wound by cutting instrument* (of any part of body), *wound by piercing instrument* (of any part of body).

3. The committee recommends the transfer of the term *circumcision* to this title from present title No. 127 (*Nonvenereal diseases of the male genital organs*).

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

172. Traumatism by Fall.

1. The committee recommends that the name of this title be changed to *Accidental fall* and that it be placed in the reliable class, without autopsy.

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2. All of the following terms as now included under this title are approved: *Accidental fall, fall down stairs, fall from horse, fall in ship, fall into hold* (ship, etc.), *injury by diving, injury from fall, traumatism by falling.*

3. The committee recommends that a footnote be added stating that this title does not include accidents connected with traffic, in burning buildings, or in mines or quarries.

4. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent, so far as the reports make this possible.

173. Traumatism in Mines and Quarries.

1. It is recommended that this title be called *Accidents and injuries in mines* and be placed in the reliable class, without autopsy.

2. It is further recommended that a new title be established to be called *Accidents and injuries in quarries*; for the present it may be referred to as 173A, *q. v.*

3. Of the terms now included under present title No. 173 the following are approved for the title *Accidents and injuries in mines*: *Accident in mine, asphyxia by gas in mine, choke damp* (unqualified), *explosion of fire damp, fall in pit* (mine), *fall in shaft* (mine), *fall of coal* (mine), *injury by mining machinery, injury by wagon in mine, injury in mine, mining accident, traumatism in mine.*

4. The committee recommends that this title be subdivided into (a) *Injuries by falls*, (b) *Injuries by falling bodies*, (c) *Explosions, asphyxia, and suffocation*, (d) *Injuries by mining machinery and vehicles*, (e) *All other accidents and injuries in mines.*

173A. Accidents and Injuries in Quarries. (Tentative new title.)

1. It is recommended that this tentative new title be placed in the reliable class, without autopsy.

2. Of the terms now listed under present title No. 173, the following are approved for the title *Accidents and injuries in quarries*: *Accident in quarry, fall in pit* (quarry), *fall of stone* (quarry), *injury in quarry, traumatism in quarry.*

174. Traumatism by Machines.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. It is the further recommendation of the committee that two subtitles be established. One should have the caption *Traumatism by elevators* with the following approved inclusions: *Elevator accident, traumatism by elevator, accident on moving stairway.* The second subdivision should have the caption *Other traumatisms by machines*, and under this subtitle the following terms are approved by the com-

mittee: *Accidental fall of machinery, caught in shafting, crushed by traveling crane, injury by machinery, traumatism by machinery.*

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of the decedent.

175. Traumatism by Other Crushing.

1. The committee recommends that the name of this title be changed to *Other crushing and transportation accidents*; that it be placed in the reliable class, without autopsy, and be subdivided as follows: (A) *Railroad accidents* (steam)¹, (B) *Street railway accidents*, (C) *Automobile accidents*, (D) *Water transportation accidents*, (E) *Other vehicular accidents and injuries*, (F) *Other crushing.*

2. Of the terms now included under present title No. 175 (*Traumatism by other crushing*) the following only are approved for the several subtitles noted above: *Automobile accident, bicycle accident, bicycle injury, crushing by bumpers, cycle accident, derailment, earthquake, electric railway accident, elevated railway accident, fall from car or engine, fall from carriage, fall from or with aeroplane, fall from or with balloon, fall from or with parachute, injury getting off car or engine, interurban railway accident, killed on railroad, landslide, motor-cycle accident, railroad accident, run over by automobile, run over by car, runaway accident, street car accident, street railway accident, struck by automobile, struck by car or engine, subway accident, surface car accident, thrown from automobile, traumatism by aeroplane, traumatism by automobile, traumatism by balloon, traumatism by electric railroad, traumatism by landslide, traumatism by other crushing, traumatism by railroad, traumatism by street railroad, traumatism by vehicle* (carriage, wagon, bicycle, etc.), *trolley accident.*

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon occupation of decedent.

176. Injuries by Animals.

1. It is the recommendation of the committee that this title be placed in the reliable class, without autopsy.

2. All of the following terms, as now included under this title heading, are approved: *Bite* (of any animal), *dog bite, gored, injury by any animal* (due to viciousness), *kick* (by horse or other animal), *troumatism by horse* (due to viciousness).

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

¹ Includes accidents on roads having portions of their systems electrified.

4. The committee recommends that the following footnote be added: This title does not include *bite of insect* or *bite of serpent* (165).

177. Starvation.

1. It is recommended that the name of this title be changed by adding parenthetically the words *deprivation of food or water*; it is a reliable statement of cause of death, without autopsy, but, owing to the fact that the word is sometimes used on death certificates in cases where the "*starvation*" was due to malnutrition from disease, the report should always be queried by registration and compiling offices. Only deaths from actual privation (deprivation of food or water) are assignable to this title.

2. Of the terms now included under this title heading the following only are approved: *Deprivation of water, hunger, inanition* (starvation), *insufficient nourishment, privation, starvation, thirst*.

178. Excessive Cold.

1. In the opinion of the committee this is a reliable title, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Effects of cold* (temperature), *exposure to cold* (3m+), *freezing, frostbite, frozen*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

179. Effects of Heat.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. Of the terms now included under this title heading the following only are approved: *Effects of heat in engine room, effects of heat in laundry, etc., excessive heat, heat apoplexy, heat cramps, heat prostration, heat stroke, insolation, overheated, sunstroke, thermic fever*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

180. Lightning.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. The term *lightning*, the only inclusion listed under this title heading, is approved.

181. Electricity (Lightning Excepted).

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. All the terms now included under this title heading are approved: *Accidental electric shock, accidental electrocution, electric shock, electricity* (lightning excepted), *injury by electric shock*.

3. The committee recommends that a separate tabulation be made of all cases in which death was dependent upon the occupation of decedent.

Conclusions on Homicides as a Class.

The committee has been advised that no death is classified as a *homicide* in the annual mortality statistics published by the Bureau of the Census unless the *fact* of homicide is shown, either on the transcript of the death certificate as received by the bureau, or through information obtained by inquiry sent out to determine the matter. The committee desires to express its approval of this practice.

182. Homicide by Firearms.

1. It is recommended that this title be placed in the reliable class, without autopsy.

2. All of the terms now included under this title heading are approved: *Assassination by firearms, gunshot* (homicidal), *homicide by firearms, homicide by gunshot, shooting* (homicidal), *shot* (homicidal), *shot by burglar, shot in duel, wound by firearms* (homicidal).

183. Homicide by Cutting or Piercing Instruments.

1. It is recommended that this title be placed in the reliable class, without autopsy. It is further recommended that the last word in the title be changed to the singular form.

2. All of the terms now included under this title heading are approved: *Assassination by cutting or piercing instrument, cut* (homicidal), *homicide by cutting instrument, homicide by piercing instrument, knife cut* (homicidal), *knife stab* (homicidal), *wound by cutting instrument* (homicidal).

184. Homicide by Other Means.

1. The committee recommends that this title be placed in the reliable class, without autopsy.

2. The committee desires to call attention to the fact that, strictly speaking, no term at present listed under this title heading is approved unless the means or instrument used and the fact that the violence was homicidal are specified. If these data are not specified the report should be queried to determine whether the death was not one assignable to title No. 182 (*Homicide by firearms*) or to title No. 183 (*Homicide by cutting or piercing instruments*). With these restrictions, and with the understanding that some of these terms are approved only as methods of violence that *may* be homicidal, the fol-

lowing list under this title is printed here: *Assassination* (without further explanation), *bite of human being*, *duel*, *homicidal poisoning*, *homicidal wound*, *homicide* (unqualified), *incendiarism*, *infanticide* (unqualified), *killed in fight*, *lynching*, *manslaughter*, *murder* (unqualified), *throwing of sulphuric acid*, *throwing of vitriol*, *traumatism* (homicidal), *wound* (homicidal).

3. The committee recommends the addition of the following term to the list of inclusions: *Homicidal strangulation*.

4. The committee recommends that a new title be established to be known as *Criminal abortion*. For the present this may be numbered 184X, q. v. It is recommended that the term *criminal abortion* (death of mother or child) be transferred to this title.

184X. Criminal Abortion (Tentative new title).

1. The committee recommends that a new title be established under the above caption and that it be subdivided into (A) *Induced by instrument or drug*, (B) *Self-induced by instrument or drug*, (C) *Induced by another person by instrument or drug*, and that each subtitle be considered reliable, without autopsy.

2. The committee recommends the transfer to this title of the following term from present title No. 184 (*Homicide by other means*): *Criminal abortion* (death of mother or child).

185. Fractures (Cause not specified).

1. The committee recommends that this title be eliminated and that such reports as can not, on inquiry, be classified under more definite titles, be assigned to title No. 186 (*Other external violence*).

186. Other External Violence.

1. In discussing this title the committee desires to call attention to the following headnote in the Manual of the International List of Causes of Death.

"NOTE.—This is the residual title for external causes. Many indefinite returns found here could be assigned elsewhere if the means of death and the character of violence (accidental, suicidal, or homicidal) were stated. Deaths from legal execution and war are also included and may be stated separately if deemed desirable."

It is evident that no "blanket" recommendation can be made as to its reliability or unreliability, without autopsy.

2. Of the terms now included under this title heading the committee approves as inclusions only such terms as, first, are so defined as to identify them, when used on death certificates, as covering cases of *death by legal execution* or *death incidental to war*, and, second, such terms as are so defined as to identify them, when used on death certificates, as both *accidental* and *caused by means*, *deaths*

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from which are not assignable to any title of the international list relating to any other specified form of violence. In other words, no inclusion under this title heading is approved that might conceal a death from homicide, suicide, or well-defined accidental violence assignable elsewhere. The following are approved inclusions: *Battle, capital punishment, electrocution* (legal execution only), *execution, football accident, hanging* (legal execution only), *killed in cyclone*.

3. The committee realizes, in making the above recommendation, that as this is a residual title, and as such necessarily a more or less indefinite title, deaths reported from ill-defined violence concerning which no definite information is obtained on inquiry must be assigned thereto.

4. The committee has been advised that it is the practice of the Bureau of the Census, so far as practicable, to query all of the unsatisfactory statements listed under this title heading in an effort to obtain data justifying their classification under more definite headings, and desires to express its approval of this practice.

5. The committee recommends the addition of the following terms to the list of inclusions: *Boxing bout, foot race, competitive athletics, athletic competition*.

6. The transfer of the following terms to this title from other titles is recommended: *Foreign body in nose* from title No. 86 (*Diseases of the nasal fossæ*); *traumatic pneumonia* from title No. 92 (*Pneumonia*); *traumatic peritonitis, foreign body in peritoneum* from present title No. 117 (*Simple peritonitis*); *traumatic encephalitis* and *traumatic inflammation of brain* from present title No. 60 (*Encephalitis*); *traumatic metritis, rupture of uterus* (nonpuerperal) from title No. 130 (*Other diseases of the uterus*); *foreign body in bladder* from title No. 124 (*Diseases of the bladder*); *foreign body in esophagus* from title No. 101 (*Diseases of the esophagus*); *foreign body in stomach* from title No. 103 (*Other diseases of the stomach*); *foreign body in urethra* from title No. 125 (*Diseases of the urethra, urinary abscesses, etc.*); *foreign body in accessory sinus, frontal sinus, maxillary sinus, antrum of Highmore* from present title No. 146 (*Diseases of the bones*); *foreign body in intestine, rectum*, from title No. 110 (*Other diseases of the intestines*); *traumatic orchitis* from present title No. 127 (*Nonvenereal diseases of the male genital organs*).

187. Ill-Defined Organic Disease.

1. Under this title are listed a number of terms, all of which are indefinite and unsatisfactory as statements of the primary cause of death. The committee recommends that the title be considered in the unreliable class, without autopsy.

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2. The committee is advised that the Bureau of the Census and many State and municipal registration offices are making determined efforts to secure more definite data when such returns are received, and desires to express its approval of this practice. It realizes that, until all such reports are eliminated, they must be classified somewhere. This, in the opinion of the committee, is the sole reason for giving this title a place in the International List.

188. Sudden Death.

1. Under this title are listed a number of terms, all of which are indefinite and unsatisfactory as statements of the primary cause of death. The committee recommends that the title be considered in the unreliable class, without autopsy.

2. The committee is advised that the Bureau of the Census and many State and municipal registration offices are making determined efforts to secure more definite data when such returns are received, and desires to express its approval of this practice. It realizes that, until all such reports are eliminated, they must be classified somewhere. This, in the opinion of the committee, is the sole reason for giving this title a place in the International List.

189. Not Specified or Ill-Defined.

1. The committee recommends that this title be placed in the unreliable class, without autopsy.

2. The committee recommends that this title be subdivided as follows: (A) *Convulsions, nonpuerperal*; (B) *Convulsions of infants*; (C) *Other unspecified or ill-defined causes of death*.

3. The inclusions constitute a mass of ill-defined and unsatisfactory terms, none of which is approved in the ordinary sense, but all of which, in view of their very indefiniteness, the committee realizes must be included here when no definite information can be secured on inquiry.

4. The committee is advised that the Bureau of the Census and many State and municipal registration offices are making determined efforts to secure more definite data when such returns are received, and desires to express its approval of this practice. It realizes that, until all such reports are eliminated, they must be classified somewhere, and that, therefore, under present conditions, this title must remain in the list.

5. On account of their indefiniteness it recommends the transfer to this title of the term *neuralgia* from title No. 73 (*Neuralgia and neuritis*) and of the terms now included under titles 70 and 71 (*Convulsions, nonpuerperal, and Convulsions of infants*).

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